



**Muskingum County Community Foundation**  
534 Putnam Avenue  
Zanesville, Ohio 43701  
P: 740.453.5192 | F: 740.453.5734  
www.scholarshipcentral.org

## Pamela Smith Jackson Memorial Scholarship Guidelines & Application for the 2019-2020 Academic Year

***Deadline: Applications must be postmarked by March 20, 2019***

Pamela Smith was born in 1950 to Addison LeRoy Smith and Wilsie Maxine Smith of Waterford, Ohio. She graduated from Waterford High School in 1968. She attended Ohio University and graduated in 1972 with a double major in history and government. She also had a minor in secondary education. Pam was a voracious reader and she enjoyed challenging herself with a variety of mind games and puzzles.

Pam developed multiple sclerosis in her adult life at approximately the age of 42. She battled this debilitating disease for the rest of her life. In 2006, Pam was diagnosed with cancer and within approximately 6 weeks, she passed away. Her four sisters have established this scholarship to honor her memory and her love of learning.

**Directions:** Scholarships offered through the Muskingum County Community Foundation (MCCF) are made possible by the generosity of donors who help students plan post-secondary education. Please review the following steps to complete the application process.

**Step 1: Applicant Recommendation Letters** – Please submit two recommendation letters. One must be from a high school teacher attesting to the student’s academic achievements and love of learning. The other form must be from the applicant’s minister or a community leader. **You are responsible for collecting the two recommendation letters in sealed envelopes and including them with your application.**

**Step 2: Transcript Information** – Please submit an up-to-date high school transcript.

**Step 3: Applicant Activities** – Please attached a list of all volunteer school, community, extracurricular, arts, musical and cultural activities you have participated in during the past four years, indicating length of participation and any special awards, honors. This can be a resume or activity sheet format. For assistance, please contact Scholarship Central at 740-453-5192.

**Step 4: If any questions** are not applicable to your current situation, please attach an explanatory note referring to the questions by section. Also, you may wish to have your school/college counselor review your application for accuracy before submission.

**Step 5:** You are responsible for ensuring all supporting documents are submitted in a complete application packet. **This application becomes valid only when the following have been submitted, postmarked on or before March 20, 2019.** Applications may not be faxed and must be sent or delivered to: MCCF | 534 Putnam Avenue | Zanesville, Ohio 43701. MCCF reserves the right to process only applications **complete** as of the application postmark deadline. *Your application must include:*

- \_\_\_\_\_ Original Application including all required signatures and two typed personal statements
- \_\_\_\_\_ Current High School Transcript
- \_\_\_\_\_ Two (2) Applicant Appraisals/Nominations in **sealed envelopes** (one from a teacher, one from a community member)
- \_\_\_\_\_ Current list of activities in resume or activity sheet format
- \_\_\_\_\_ Applicant must sign application (page 3)

## Pamela Smith Jackson Memorial Scholarship Guidelines

Applicants must be a 2019 high school senior from Waterford High School or West Muskingum High School with a minimum GPA of 3.0. The applicant must be involved in community and volunteer activities and planning to obtain a bachelor's degree in any subject area.

**Notification of Awards:** All scholarship award recipients will be officially contacted by the Foundation no later than June 1, 2019. You may check the Foundation's website at [www.scholarshipcentral.org](http://www.scholarshipcentral.org) for a complete posting of all recipients.

**Amount of Award:** \$1,000 Waterford High School recipient/ \$1,000 West Muskingum High School recipient

## Pamela Smith Jackson Memorial Scholarship Application

### Applicant Information

Mr.

Ms.

NAME: First

Middle Initial

Last

Date of Birth: \_\_\_\_\_

Current Address: \_\_\_\_\_

Street

City

State

Zip

Permanent Address: \_\_\_\_\_

Street

City

State

Zip

Phone: ( ) \_\_\_\_\_ Cell: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

### Family Information

Name of parent/guardian(s): \_\_\_\_\_

Permanent mailing address and telephone number of parent/guardian:

Street

City

State

Zip

Phone

Father's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Highest level of education attained by father: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Highest level of education attained by mother: \_\_\_\_\_

Brothers' and Sisters' Names and Ages:

1. \_\_\_\_\_

4. \_\_\_\_\_

2. \_\_\_\_\_

5. \_\_\_\_\_

3. \_\_\_\_\_

6. \_\_\_\_\_

## School Data

**High School Attended:** \_\_\_\_\_ **Graduation Date: (MM/YY)** \_\_\_\_\_

**Current Post-secondary Institution(s) for which applicant's scholarship is requested:**

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**Major Field of Study Applicant Plans to/is Pursuing:** \_\_\_\_\_

### Estimated Cost

**Tuition: \$** \_\_\_\_\_ **Room & Board: \$** \_\_\_\_\_ **Books/Materials: \$** \_\_\_\_\_

**Based on:**     Quarterly     Semester     Annual

### Please Circle

**I will:** Live on Campus                      Live off Campus                      Commute

**I will be enrolled:**    Less than Half-Time                      Half-Time or More                      Full-Time

## Financial Aid

**Please list all Awards and Amounts, including Grants, Scholarships and Student Loans already received for the upcoming academic year, indicating if awards are one-time or renewable:**

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**Please list any pending scholarships, grants and loans you are seeking for the upcoming academic year:**

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## Personal Statements

**Please attach your typed response to the following questions. It is important for these personal statements to be well thought out and delivered in a well-written manner.**

1. What do I want to do with my life? (250 – 750 words)
2. How did you learn about MCCF Scholarship Opportunities and what made you apply?

## Transcript Information

**Students** must include recent high school transcripts of grades.

**Certification:** *In submitting this application, I certify the information provided is complete and accurate to the best of my knowledge. Falsification of information will result in termination of any scholarship granted.*

**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**All Applications Must Be Postmarked By March 20th** and mailed to the Muskingum County Community Foundation, Attn: Heather Sands | 534 Putnam Avenue | Zanesville, Ohio 43701. *For questions please call: (740) 453-5192 or email scholarshipcentral@mccf.org*