Heart of Appalachia Talent Search Scholarship Application

Academic Excellence

- * Minimum of 2.50 Cumulative High School GPA
- * Difficulty of Classes Taken-provide a copy of transcript
- * ACT/SAT Scores-provide a copy of scores for all times taken
- * Letters of acceptance to post-secondary institutions

* Scholarship award notification letters

* Copy of FAFSA Student Aid Report-include cover page

Leadership & Community Service

* Organizations and Offices Held * Awards and Recognition * Community Service * Employment * Volunteer Work * Activities and Honors * Active participant in the Heart of Appalachia Talent Search Program

Essay & Recommendation

Essay - "Describe how the HATS Program has impacted your life and helped you toward achieving your future goals."

<u>Recommendation</u> - Form must be from: a teacher, counselor, principal, former employer or community member. (*Recommendation can not be from a family member).

Send the completed application to the HATS Program

By mail: HATS Program, One John Marshall Drive, 210 GH, Huntington, WV 25755 By email: Scan the completed application as a **.pdf** and email it to <u>HATS@marshall.edu</u> Call the HATS program if you have guestions or concerns: 304.696.2941

The completed application must be received by APRIL 4, 2025.



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- * The HATS Program must receive the complete scholarship application by APRIL 4, 2025.
- * The application must be fully completed; incomplete applications will not be considered.
- * A copy of school transcript, all ACT/SAT Test Scores, all letters of acceptance to post-secondary institutions,
- scholarship award notification letters, and a copy of the student's FAFSA Student Aid Report.
- * The Recommendation form must be completed by a non-family member and returned with this application.

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Student Information

First Name:	Last Name:		MI:
Street Address:			
City:	State:	Zip Code	2:
Date of Birth:///////	E-mail:		
	Parent/Guardian Informa	ation	
Parent/Guardian Name:			
Level of Education Completed: Hig	gh School Some C	ollege	College or Higher
Parent/Guardian Name:			
Level of Education Completed: Hig	gh School Some C	ollege	College or Higher
	Academic Informatio	n	
High School Cumulative GPA:	Composite ACT Score:	SA	T Score
Have you applied for admission to	a Post-Secondary School?	Yes No	
If so, where?			
Have you been accepted? Ye	s No (If yes, please provid	de copies of acc	eptance letters)
Major Field of Study:	Career goal: _		

List the organizations that you have been a member, office held, and years of membership.

Organization	Office Held		Years of Membership
List award(s) or special record) of the award(s)
	Recognition		Date Received
What grade or year did you become a men	hber of the HATS Progra	am?	
Please mark the activities/services offered	by the HATS Program ir	which you have	participated.
Monthly HATS Meetings	Cultural Trip/Event	College C	ampus Visits
STEM Workshops	Financial Aid Event		
Write the essay	and attach it to your co	omplete applicati	on.
Describe how the HATS Program has impa	cted your life and helped	d you toward ach	ieving your future goals."
I certify that the statements contained in th	is application are true a	nd complete to t	he best of my knowledge.
certify that the essay submitted is original a	and is not under obligati	on to, or current	y being reviewed for consi

ation by any other entity or individual.

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This form should be completed by a professional (i.e. teacher, academic counselor, principal, or employer).

Scholarship Applicant's Name:				
What is your relationship to the applicant?	Teacher	Academic Counselor	_ Principal	Employer

Other (Please Specify) ______ How long have you known the applicant?______

Rate the student to the best of your ability.

Category	No Basis for Judgment	Below Average	Average	Excellent
Attitude				
Desire to Succeed				
Leadership				
Integrity				
Community Involvement				
Communication Skills				
Desire/Ability to Overcome Obstacles				

Comments:

Signature:	Position/Title:	
School or Business Name:	Work Phone:	
E-mail Address:	Date:	

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