



## ***BRYAN COUNTY OHCE***

Pat Accountius, Scholarship Chair  
2854 Cypress Rd.  
Durant, Oklahoma 74701-0172

(580)920-0673

*March 31, 2017  
Friday*

Dear Principal/Counselor:

Please find enclosed a copy of the Bryan County Scholarship Application. We would appreciate it if you would make copies of this application and inform your students of its existence.

For a number of years, the Bryan County Oklahoma Home and Community Education (OHCE) has offered two \$700.00 scholarships to students throughout Bryan County. It is part of this organization's goals to assist a deserving student to further his/her education.

The application is self-explanatory. The timeliness of the return is imperative. Most importantly, if selected, the student must produce the proof of enrollment to whatever accredited school he/she chooses to attend.

The applicant will be notified whether or not they have been awarded the scholarship.

We appreciate your assistance in informing and assisting the student population of this opportunity. Please do not hesitate to call (580-920-0673) with any questions you may have.

Sincerely,

Pat Accountius  
OHCE County Scholarship Chair

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**BRYAN COUNTY  
ASSOCIATION FOR HOME AND COMMUNITY EDUCATION**

**SCHOLARSHIP APPLICATION**

**Requirements for Scholarship:**

1. Bryan County OHCE members' applications will be considered first.
2. Applicant must attend an accredited university of their choice.
3. Applicant needs to have a 3.0 GPA or higher
4. Applicant must be a resident of Bryan County
5. Proof of enrollment

**General Scholarship Guidelines:**

1. Application must be typed or completed by a computer. Format must match official form
2. Please do not use more than the pages allotted to answer application questions.
3. Sign Application
4. Submit the forms to Pat Accountius, OHCE County Scholarship Chair,  
2854 Cypress Rd. Durant, OK 7401-0172 no later than March 31, 2017.

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Telephone:** (    ) \_\_\_\_\_

**Age on March 31, 2017:** \_\_\_\_\_

**Parents' or Guardian's name:**

**Father:** \_\_\_\_\_ **Occupation:** \_\_\_\_\_

**Mother:** \_\_\_\_\_ **Occupation:** \_\_\_\_\_

**How many members in your family?** \_\_\_\_\_

**Name and relationship of OHCE member:** \_\_\_\_\_

**Will you be receiving other scholarship awards this year/** \_\_\_\_\_

## **II ACADEMIC INFORMATION**

Name and address of high school attended

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Date of Graduation: \_\_\_\_\_

Cumulative GPA:

Rank in the class of \_\_\_\_\_

Upper 25% \_\_\_\_\_

Upper 50% \_\_\_\_\_

Scholastic Organizations and/or honors received: \_\_\_\_\_

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## **III. EDUCATIONAL INFORMATION**

Describe why you are interested in pursuing an advanced education.

Which fields of study are you majoring or plan to major?

Outline your reasons for choosing this field of study.

Describe how you would use this scholarship as you make plans to finance a college degree.

## **IV. DESCRIPTION OF LEADERSHIP AND COMMUNITY ACTIVITIES**

Describe your leadership and citizenship activities and the impact they have had on your community. Include school, church, and community organizations. )Limit response to two pages.)

I have personally prepared this application and believe it to be correct.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Counselor/Principal's Signature

(Application will not be considered if received after March 31, 2017)

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**Dear Counselor/Principal:**

**Please complete the questions below. Your input is essential to our committee to make a decision based on as much information as possible.**

**Thank you for taking the time to complete this form and please mail it to: (You may return it to the applicant to be mailed with their part if you prefer.)**

**Pat Accountius  
OHCE Bryan County Scholarship Chair  
2854 Cypress Rd.  
Durant, Oklahom 74701-0172**

**Student's Name:** \_\_\_\_\_

**Cumulative GPA:** \_\_\_\_\_ **ACT/SAT composite score:** \_\_\_\_\_

**Please indicate one:**

**I highly recommend this student and why** \_\_\_\_\_

**I do not recommend this student and why:** \_\_\_\_\_

\_\_\_\_\_  
**Principal/Counselor**

\_\_\_\_\_  
**Date**