

Wicomico County Council of PTA's
Royd A. Mahaffey PTA Scholarship Application
www.pta.org and www.mdpta.org

SCHOLARSHIP GUIDELINES

Every year the Wicomico County Council of PTA's awards a graduating senior in each of the four county high schools with a \$500 Royd A. Mahaffey Scholarship. This award is in memory of Mr. Mahaffey who served as Wicomico County Superintendent of Schools from 1957 until his death in 1975. The name of the Scholarship will be **Royd A. Mahaffey PTA Scholarship**.

A total of \$ 2000 (two thousand dollar) will be awarded by WCCPTA. Each scholarship will be for \$ 500 (five hundred dollar) awarded to a graduating senior in each of the county high schools.

The applicant must be a high school senior from Wicomico High School, Mardela High School, Parkside High School, or James M. Bennett High School who has been accepted in any accredited, degree-granting post secondary institution

A scholarship recipient must be a member in good standing in PTA/PTSA local unit. Notification of the availability of the scholarship will be made by March 1st in each of the county's senior high schools.

The selection committee will make the final decision no later than May 1st. Factors to be considered are academic performance, community activities, financial need, extra-curricular and PTA participation. The decision of the committee is final.

Scholarship recipients will be recognized at the WCCPTA Annual Banquet in May of each year.

Scholarships will be for one year and must be used for tuition, room and board, books, or other required fees. Scholarship money not used for these purposes is to be returned by the recipient to the WCCPTA.

The scholarship committee will consist of 1) the president of the council who will serve as a committee chairperson 2) the vice-president, 3) three members at large.

The money will be forwarded to the recipient upon verification from the institution, by way of a Bursar's bill, that the student is attending an accredited, degree-granting, post secondary institution. Students are advised to submit the bill from the college to WCCPTA.

We seek your encouragement for qualified students to apply. To qualify for consideration, please ensure that all scholarship applicants fill out the enclosed application in its entirety and submit all required information, including requested signatures, by the **postmarked deadline date of APRIL 1,**

This information is due at your Guidance Office by March 25,

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SCHOLARSHIP APPLICATION

Name _____
(Last) (First) (Middle Initial)

Home Address _____
(Street) (County)

(City & Zipcode) (Phone)

High School last attended or presently attending _____

Date of graduation (or anticipated date) _____

Are you a PTSA member: _____ PTSA member from: _____

Names of Parents/Guardians _____ PTSA members from _____

Name(s) of College or Technical School to which you have applied	Accepted?	Yes or No
_____	_____	_____
_____	_____	_____
_____	_____	_____

ACADEMIC AWARDS/SCHOLARSHIPS

SCHOOL ACTIVITIES (PTSA activities & years of participation, awards/recognitions)

COMMUNITY SERVICE (years of participation, awards/recognitions, brief description)

EMPLOYMENT HISTORY (please include total income)

Describe the one activity related to students of which you are most proud. Why?

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STATEMENT OF PARENT/GUARDIAN

APPLICANT'S NAME _____

Since NEED is an important factor in making awards, the following information is essential:

Family Composition

Name	Age	Relationship to Applicant	Attending School?
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Annual Household Income: \$ _____

Other Sources of Income for College: _____

Unusual Financial Obligations: _____

Comments: _____

I verify that the above information is correct.

➤ _____
Signature of Parent/Guardian

➤ _____
Signature of Applicant

Submit the following materials as the application packet: 1) Two-page Application signed by applicant 2) Signed Statement of Parent/Guardian; 3) Signed Report of Guidance Counselor or Principal; 4) Recommendation letters; 5) Transcript of Grades and Test Scores.

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REPORT OF GUIDANCE COUNSELOR OR PRINCIPAL

Name of Student _____

School Name _____

School Address _____ County _____

Describe this student's personal qualities.

In your opinion, what is the applicant's potential for success ?

Do you know of any unusual circumstances that should be brought to the attention of the scholarship committee?



Signature of Guidance Counselor or Principal

Current GPA

Weighted GPA (if applicable)

PTA – every Child, one Voice

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*Please send transcript of grades and test scores with the application packet submitted by the student.
Applications will not be considered without transcripts.*