



## **PASTOR CRAIG SMITH MEMORIAL SCHOLARSHIP ELIGIBILITY**

**TO QUALIFY FOR THIS SCHOLARSHIP, YOU MUST BE A GRADUATING SENIOR OR A FIRST YEAR NON-TRADITIONAL STUDENT FROM THE KANE OR SMETHPORT AREA SCHOOL DISTRICT WHO IS PURSUING ANY POST-SECONDARY DEGREE OR CERTIFICATION. CANDIDATE SHOULD PLAY AN ACTIVE ROLE IN HIS/HER CHURCH, SCHOOL AND/OR COMMUNITY.**

For consideration this application must be completed and returned to the guidance office by **March 1**. There will be no exceptions. The Scholarship Selection Committee, appointed by the Board of Directors of the McKean Community Foundation, will select the scholarship recipient.

### **Pastor Craig Smith Memorial Scholarship Fund**

Pastor W. Craig Smith, born June 25th, 1938 on his family farm in Limestone Township, PA and died February 12th, 2018 in Erie, PA. Pastor Craig was the minister at both the Mt. Jewett and Hazel Hurst United Methodist churches. His ministry was his greatest passion.

Before being called to the Methodist ministry, he worked on the LEF and C Railroad for many years. He completed a course of study through the Wesley Theological Seminary in Washington, DC; graduating in 1998. He announced sporting events for the Hound Radio Station in St. Marys, PA and was the founder of the radio program "The Light on The Hill" that was broad casted every Sunday morning and touched many lives. He also had been active as a coach and umpire in little league. He was a wonderful man of God and mentor to many children and young adults. He would be honored and thrilled to know that you have applied for a continuing education scholarship in his memory.

### **TERMS FOR SCHOLARSHIP**

The committee will grant the **Pastor Craig Smith Memorial Scholarship Fund** as instructed. The selection of students to receive scholarship grants shall be made by the committee without regard to race, religion or sex of the applicant or their political perspectives. The committee will not place restrictions upon a candidate's choice of college or university.

The committee shall require, prior to the disbursement of any scholarship, proof that the scholarship recipient is actually enrolled as a student at the educational institution for which the grant is made, and all scholarship grants shall be paid only to the education institution attended by the recipient and never directly to the recipient. This grant covers tuition, fees, and books for the applicable fall, winter, or spring quarter.

**The Community Foundation is approved as a PATH Program participant.** *If you are awarded a scholarship of at least \$200 from the Community Foundation, we will submit your name to AES/PHEAA for additional scholarship funding through PATH. To be eligible for the PATH award, you must meet the following criteria: be enrolled in an approved Pennsylvania College or career school; be a State Grant recipient and have a Federal Student Loan; and demonstrate financial need for PATH Program Grant. PATH grants will not exceed the Maximum State Grant for the particular academic year.*

**If you have questions, talk to your guidance counselor or contact the Foundation at  
814-834-2125 or 844 238-2289.**

### **HIGH SCHOOL STUDENTS RETURN DIRECTLY TO YOUR GUIDANCE OFFICE**

**Non-Traditional Students return by March 1 to:  
McKean County Foundation ~ Box 934, St. Marys PA 15857  
Fax: 814 834-2125 or [mccf@mckeanfoundation.org](mailto:mccf@mckeanfoundation.org)**

Type or print neatly in black or blue ink. Only complete applications will be considered.

**Personal Information:**

Last Name		MI	First Name	
Street Number	Street Address		Apt. /Unit Number	
City		State	Zip Code	
Sex: M F	Date of Birth: MM DD YYYY	Name of High School		Date of Graduation
E-mail Address		Home Phone	Cell Phone	

**Parental Information:**

Father's Last Name		MI	First Name	
(If different) Street Number	Street Address		Apt. /Unit Number	
City		State	Zip Code	Best Available Phone Number
Name of Employer		Employed Since		
Mother's Last Name		MI	First Name	
(If different) Street Number	Street Address		Apt. /Unit Number	
City		State	Zip Code	Best Available Phone Number
Name of Employer		Employed Since		

**Academic Information:**

High School Course of Study	Circle: Intended Enrollment Status:	Full Time	Part Time
Intended Post-Secondary Major	Anticipated College Graduation Date: ____/____ MM/ YYYY		

**Employment Information:**

Do you currently have a part-time job? \_\_\_\_\_ If yes: \_\_\_\_\_  
Position

Name and Phone Number of employer	Wages
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**Educational Insights:**

For the Summer/Fall Session, please list the names of the schools you have applied to. Indicate if you have been accepted to or are waiting to hear from the school.

1) \_\_\_\_\_ Y N      2) \_\_\_\_\_ Y N  
Have you been accepted?      Have you been accepted?

Of the above schools, what is your first choice: \_\_\_\_\_

**Financial Information:**

*Please enter your Expected Family Contribution (EFC) number that can be found on the top of your Student Aid Report (SAR), which is generated after completing your Free Application for Federal*

*Student Aid Form (FAFSA): \_\_\_\_\_ . If this number is not available at the time of submitting the application, please provide details as to the status of FAFSA. Please fax or call the Community Foundation office when the number becomes available.*

**Attachments:**

- Please attach an activity resume that highlights all of your activities in the sectors of school and community and any honors and/or awards you have received.
- Please attach a short, computer-generated essay (200-250 words) responding to the question: How has faith influenced your life? The essay should be written with 1 ½ inch spacing, margins justified, 12-point font in Times New Roman. Check for neatness, spelling and structure.
- Please include your most current high school transcripts or guidance office summary of your class rank, SAT / ACT scores and GPA.

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I attest that all personal data included within this application is truthful and in no way misleading. All contents have been completed entirely by myself (the applicant) to the best of my knowledge.

If I am selected as a recipient of a McKean County Community Foundation scholarship, I agree to permit the Foundation to confer with my school to verify my continuing enrollment during the term of my scholarship. I also agree that my name and photograph can be used in announcements made by the McKean County Community Foundation regarding the particular scholarship(s) for which I have been awarded. I also agree that by signing this I permit my high school to give the McKean County Community foundation information regarding my SAT scores, ACT scores, GPA, and class rank.

Awards may be used at any accredited, nonprofit college or university within the United States.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date of Signature