

W. B. Snow Scholarship Application

Mr. W.B. Snow was the founder of a long distance trucking company this scholarship is named in his honor. The purpose this scholarship is to promote the professional growth of all persons seeking training and education in the manual skills and trades in Summit County.

Name:	Career Education Program:
Address: City, State, Zip Code:	
Home Telephone Number:	Program School:
Cell Phone Number:	Home School:
Name of Parent/Guardian:	Name of High School Counselor:
Address of Parent/Guardian:	Home Telephone Number of Parent/Guardian:
	Cell Phone Number of Parent/Guardian:

Name of University, College, Technical College, or Apprenticeship Program to which you have been accepted or applied:

Planned Major: _____

Score of ACT/SAT: _____ If you have not yet taken the ACT/SAT what date have you registered to take the ACT/SAT? _____

Describe your participation in your program's Career Technical Student Organization (CTSO):

List below any awards & honors you have received:

List below any work experience, include the employer name, type of work, whether you were full-time or part-time, and dates of employment.

Describe Briefly:

Qualifications of a good employee:

Where you see yourself in 5 years:

Why you have chosen the career field you are entering:

How your participation in your career education program has molded your career decision:

With your application please include the following:

Letter of Acceptance or Proof of Application to University, College, Technical College, or Apprenticeship.

High School Transcript

Two letters of recommendation **other than career education teacher or family member**

Teacher will attach the teacher recommendation form before submitting to the Career Education Office on or before February, 13th, 2013

Please note that late or incomplete applications will not be accepted.