

THE SARA AND WARREN WELCH FOUNDATION SCHOLARSHIP LOAN APPLICATION GUIDELINES

The Sara and Warren Welch Foundation Scholarship Loan is awarded to selected recipients annually. The maximum amount of loan is subject to change. Applicants are expected to repay scholarship loan. Criteria for selection are merit based on prior academic performance; performance on tests; recommendations; financial need; motivation; and plans to further their education.

Application Procedure

Applications for the loan may be obtained by a written request, addressed to The Sara and Warren Welch Foundation, P. O. Box 125, Newville, Pennsylvania. Completed applications should be returned promptly to P. O. Box 125, Newville, Pennsylvania, 17241-0125.

Upon approval of loan, funds will be paid directly to the school of your choice. Proceeds of loan must be used for educational purposes only.

Applicant must reapply for scholarship loan each year.

Repayment of loan will begin no later than four (4) months after graduation or termination of study. Monthly payments, including interest at four (4%) percent, will begin at that time and will continue no longer than five (5) years--unless approved by The Sara and Warren Welch Foundation's Board of Directors. A minimum payment of \$60.00 per month will be required.

Guidelines

1. Applicant must be graduated from Big Spring School District or be taking a college course while a student at Big Spring.
2. Any Big Spring High School student or graduate is eligible to apply for the loan. Letters of reference from one teacher and from one guidance counselor and a copy of high school transcript must accompany the application.
3. The applicant must be accepted by any type of accredited post-secondary institution.
4. Graduates must become and remain full-time students at the chosen institution.
5. **Transcripts of grades must be submitted to the Board of Directors by the recipient on a regular basis.**

Parent Information:

Name	Relation (Father, Guardian, Spouse, etc.)		Age
Street Address	City, State, Zip	Home Phone	Work Phone
Occupation	Employer	Years Employed	

Name	Relation (Mother, Guardian, Spouse, etc.)		Age
Street Address	City, State, Zip	Home Phone	Work Phone
Occupation	Employer	Years Employed	

List all children, including applicant, currently residing with you.

Name:	Name of Present School / College or Occupation	Age
(Applicant)		
(Others)		

List any other dependents receiving financial support from family.

Name:	Relationship:

Parent's Annual Income & Expenses

		Total This Year	Estimated Next Year
a) Salaries & Wages before Taxes	Father Mother	_____	_____
b) Other Income (Dividends, Social Security, Interest, etc.)	Father Mother	_____ _____	_____ _____
c) Gross Income (a + b)			
Living Expenses:			
d) Rent / Mortgage			
e) Car Payment			
f) Loan Payment			
g) Other			
h)			
i)			
Total:			

