



Joseph J. & Amelia B. Nora Memorial Scholarship Criteria Norway Area Community Foundation

This scholarship will be awarded annually to a graduating senior **who will be attending either Michigan State University or the University of Michigan**, and who has completed the scholarship application form. The recipient will be selected by the local scholarship candidate committee. Scholarships will be awarded for study at either university in alternating years, if possible, or on a 50/50 basis over time.

1. The scholarship is for one year only. The annual scholarship award will be determined by what is available for the year.
2. The recipient must be committed to a four-year degree program in the area of study of his/her choice at either Michigan State University or University of Michigan.
3. The recipient must have demonstrated a potential for success in college by his/her academic record, work habits, responsibility, and character.
4. The recipient shall exhibit leadership qualities, participate in school activities, and concern for others.
5. Submit an essay (150-250 words) on how your work habits, responsibility, and character will help you obtain your goals in the field you have chosen to go into.
6. If candidates have comparable qualifications, financial need shall determine the selection.
7. Applications must be on file in the counselor's office by **March 15th**. Failure to turn in your application by the due date will result in being ineligible to apply for this scholarship.

The scholarship committee shall consist of:

- Superintendent of Schools
- High School Principal
- High School Guidance Counselor
- High School Faculty Representative

This scholarship is in memory of Joseph J. and Amelia B. Nora, lifelong residents of Norway and leaders in community and personal service.



Joseph J. & Amelia B. Nora Memorial Scholarship

Dickinson Area Community Foundation

Completed applications must be submitted by March 15th

Date			
Full Name			
Street Address			
City ST ZIP Code			
Home & Cell Phone			
E-Mail (Required)			
High School Attended			
GPA			
Class Rank			ACT Score:
Leadership positions held:			
School Activities you participated in:			
Check below the university you plan to attend:			
Michigan State University		University of Michigan	
Did you work during the school year?		If yes, how many hours/week?	
Weekly earnings:		Do you have any savings for college?	
Approximate amount of savings:			
Name of person(s) dependent upon your earnings (if any)?			
Will you work while attending college?		If so, for what portion of your expenses?	
How much do you estimate it will cost you to go to the college of your choice for one year?			



Tuition & Fees	\$ _____	
Room & Board	\$ _____	
Books & Supplies	\$ _____	
Miscellaneous	\$ _____	
Total:	\$ _____	
Will you attend college if you do not receive a scholarship?		
Please include the following with the application:		
<ol style="list-style-type: none"> 1. An essay (150-250 words) on how your work habits, responsibility, and character will help you obtain your goals in the field you have chosen to go into. 2. High school transcripts 		
Application Deadline		
All applications need to be submitted to the guidance counselor's office by March 15th .		
Agreement and Signature		
By submitting this application, I affirm that the facts set forth in it are true and complete. I understand any false statements, omissions, or other misrepresentations made by me on this application may result in rejection of this application.		
Name (printed)		
Signature		
Date		
Parent Application Form		
Name of parent or guardian completing this form:		
Home address:		
Phone:		
The purpose of supplying us with the following information is to determine if the applicant comes from a family of modest means. With the information you supply the Nora scholarship committee will determine if the applicant is qualifies. It will, therefore be necessary to obtain confidential information. Your answers to the following questions will be treated strictly confidential.		
What was the household total income for the year 20____ ? \$ _____		
Parent #1 _____	Parent #2 _____	
What was the source of the income?		



<p>What was the general distribution of your income for 20__ ?</p>
<p>Do you have any dependents other than your own family or other extenuating circumstances that should be considered? If yes, please explain:</p>
<p> </p>
<p>Do you have a 529 Plan or college fund set up in your name through a relative?</p>
<p> </p>
<p>Are there savings, insurance policies or annuities intended for the college education of the applicant?</p>
<p> </p>
<p>Note here any statements you may wish to make which assist the scholarship selection committee in consideration of the applicant:</p>
<p> </p>
<p>Agreement & Signature:</p>
<p>I affirm that the statements above are true and complete. I understand any false statements, omissions, or other misrepresentations made by me on this application may result in rejection of this application.</p>
<p>Signature of parent or guardian:</p>
<p>Date:</p>

RELEASE OF INFORMATION

I hereby certify that any information needed regarding my scholarship requirements be made available to the Director of the Dickinson Area Community Foundation and the Nora Scholarship Committee.

Signature of Applicant: _____ Date: _____