

APPLICATION DUE MARCH 15, 2012.

Send to ECO Food Dealers, 1200 North Main Street, North Canton, OH 44720

*APPLICATION FOR*  
*Richard C.*

*Hetherington*

*Memorial*

*Scholarship*

**WHO IS ELIGIBLE?**

All ECO Retail Members and their immediate family. All employees of ECO Retail Members and their immediate family.

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Student Name \_\_\_\_\_

Home Address \_\_\_\_\_

School \_\_\_\_\_

School Address \_\_\_\_\_

ECO Sponsoring Member \_\_\_\_\_

I have been accepted and/or plan to attend the following  
post-high school institution \_\_\_\_\_

Attendance Percentage \_\_\_\_\_

Grade Point Average \_\_\_\_\_

(Based on 4.0 scale.)

***IMPORTANT!***  
***PLEASE ATTACH YOUR LATEST***  
***HIGH SCHOOL OR COLLEGE TRANSCRIPT***

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## APPLICATION

This scholarship was established to provide financial assistance for those students who desire to further their education. If interested please complete the following information.

Name \_\_\_\_\_

Address \_\_\_\_\_  
(street) (city) (zip)

Telephone \_\_\_\_\_ Birthday \_\_\_\_\_

Fathers Name \_\_\_\_\_

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Mothers Name \_\_\_\_\_

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Number of younger brothers \_\_\_\_\_

younger sisters \_\_\_\_\_

Father is employed part time \_\_\_\_ or full time \_\_\_\_

Mother is employed part time \_\_\_\_ or full time \_\_\_\_

Applicant is employed part time \_\_\_\_ or full time \_\_\_\_

Names of older brothers or sisters who will be attending college or some type of school next year:

(name)

(college or school)

_____	_____
_____	_____
_____	_____

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## Application continued

I have applied for admission to:

(name of college or school)

(accepted)

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I plan to study or major in:

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Along with this application, please submit a letter not to exceed 300 words stating why you feel you should be considered for the scholarships. Areas that may be covered are: obstacles that you have had to overcome, ways you have helped others overcome obstacles, ability, future plans, awards, activities, achievements, interests, and financial need. Please make sure you cover school, church and or community organizations in which you have participated.

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Please list the individuals that you gave scholarship recommendations to:

NAME	TITLE	EMPLOYER	TELEPHONE
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Have you applied for other scholarships, loans, or grants? \_\_\_\_\_

If yes, please give the names and amounts you will receive if you know at this time.

(scholarship-loan-grant)

(amount)

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Application continued:

Anticipated cost of attending school or college next year:

Tuition \_\_\_\_\_

Room and board \_\_\_\_\_

Textbooks \_\_\_\_\_

Transportation \_\_\_\_\_

Miscellaneous \_\_\_\_\_

Total \_\_\_\_\_

Give below information that should be considered in showing that you need financial assistance.

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List honors, awards and achievements while in high school:  
(national honor society, grade average, offices held, sports)

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I understand that this is a one-year scholarship. If for any reason, circumstances prevent my attending college; the chairperson of the organization is to be notified immediately in order that someone else may use the scholarship.

**CONSENT TO RELEASE INFORMATION:**

I, the undersigned, do hereby give my consent to my school for release of information relating to my educational background.

\_\_\_\_\_  
(Parent's signature)

\_\_\_\_\_  
(Student signature)

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