



The Greater PineBelt Community Foundation Omi Ruth Boston Twyner Scholarship Fund

PURPOSE

The Omi Ruth Boston Twyner Scholarship was established by family members to honor the memory of Omi Ruth Boston Twyner, a former Laurel School District home economics teacher. The Scholarship is awarded annually to a Laurel High School student based on academic excellence, civic engagement, and financial need.

The recipient will be a person graduating with a sound record of achievement in his or hers studies and outstanding school citizenship. This annual award will also include recognition of leadership ability by selecting a graduate who has taken initiative in school activities and/or organizations that contribute to an improved quality of life for the greater community. Preference will be given to the first generation, college-bound students.

SCHOLARSHIP INFORMATION

The Omi Ruth Boston Twyner Scholarship will make available a scholarship in the amount of \$1,000 to a qualified candidate who will attend or is attending an accredited two and/or four year college or university.

CRITERIA

In making an aware, the Scholarship Advisory Committee will use the following criteria:

- Scholastic Achievements
- Acceptance to an accredited college or university
- Extracurricular Activities
- Recommendation Letters

ELIGIBILITY

- Applicants must be a US Citizen or legal permanent resident alien and a high school senior from Laurel High School who is graduating with the current graduating class.
- Applicants must have a minimum 2.5 grade point average on a 4.0 scale and must provide an official high school transcript, in a sealed envelope, that includes the first semester of senior year.
- Applicants must register as a full time student within 6 months following date of high school graduation at any four- year college or university. (Note: Proof of enrollment must be provided before funds are distributed.)
- Applicants must attach three (3) letters of recommendation from the following individuals:
 - Guidance Counselor or Teacher
 - Leader of a community organization in which the student participates
 - Any other non- family adult of the student's choosing (e.g. boss, religious leader

NOTIFICATION

Applicants will be notified by mail about the status of their application no later than May 1. Scholarship funds will be distributed directly to the institution of the applicant's choice no later than July 15.

GUIDELINES

Each complete application must be received by the Scholarship Advisory Committee by March 1.

- Completed application form
- Essay
- Official high school and/or post-secondary school transcripts
- Copy of ACT or SAT score

QUESTIONS

Contact the PineBelt Foundation at 601.583.6180 or pinebeltcf@bellsouth.net



OMI RUTH BOSTON TWYNER SCHOLARSHIP FUND

(Application is for the School Year beginning in the Fall & ending in the Spring)

SCHOLARSHIP APPLICATION

Full Name: _____ SSN (last four digits only): _____

Date of Birth: _____ Country of Birth: _____

Mailing Address: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Parent/Legal Guardian: _____

Parent/Legal Guardian's Address: _____

High School Attended/ Attending: _____ Graduated Date: _____

School Address: _____

Current GPA: _____

ACT Score: _____ or SAT Score: _____

Previous College and/or university attended: _____ Years Attended: _____

College and/or university you plan to attend: _____

Class Level: _____ College GPA: _____

School Address: _____

Major/Career Goals: _____

Please list Gross Annual Household Income and Sources of Income (Work, Social Security, Child Support, etc.). Please note that this information is subject to verification should you become a scholarship finalist):

\$ _____ Sources: _____

Briefly describe your family living situation (example: single or two- parent home, or guardian including relationship:)

Are you a first generation college bound student (neither parent nor guardian completed college)?

Yes _____ No _____

List honors/awards/scholastic achievements that you have received in the last four years:

Award/Honor/Achievement	Year Received

List school or community activities that have been most significant to you during the last four years:

Activity	Position Held	Involved from (mm/yyyy):	Involved to (mm/yyyy):

List any work experience (including summer and part-time) you have had over the past four year:

Job Title Position Held Dates of Employment(mm/yyyy) Average Number of Hours/Week

Name and amounts of any scholarships you expect to receive:

(Please do not apply if you are receiving a full scholarship, including books from another source)

ESSAYS

Please answer one (1) of the following essay questions and attach it to the application separate pages with your typed answers (put your name at the top of each additional page).

1. Describe your most meaningful achievements and how they relate to your field of study and your future goals.
2. Discuss one challenge or hardship you faced and describe how you preserved through it and what you learned from it.
3. What does "success" mean to you?

I certify that all information on this form is true and complete to the best of my knowledge. I understand that I may be asked to provide proof of information stated on this form.

Signature of Applicant: _____ Date: _____

APPLICATION CHECKLIST

I have included one copy of the following:

- Completed application form
- Essays
- Three Letters of Recommendation (Please list names)
- Official High School Transcrip
- Copy of ACT or SAT score
- Resume

**Completed application must be received
at the address below by March 1:**

**Omi Ruth Boston Twyner Scholarship Committee
The Greater PineBelt Community Foundation
1507 Hardy Street Suite 208
Hattiesburg, MS 39401**

**The Greater PineBelt Community Foundation
Omi Ruth Boston Twyner Scholarship Recommendation Form**

PART A: TO BE COMPLETED BY THE APPLICANT

Full Name: _____

Mailing Address: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

High School: _____

Current GPA: _____ Class Rank: _____ Class Size: _____

ACT Score: _____ or SAT Score: _____

Person Writing Letter: _____

Relationship to Applicant: _____

PART B: TO BE COMPLETED BY THE EVALUATOR

Name: _____ Title: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____

Email Address: _____

How long have you known the scholarship applicant? _____

In what capacity are you familiar with the applicant's education and/or personal background? _____

Return this form and any additional sheets to the applicant listed above. Please fill out the information requested below and provide additional comments about the applicant that you deem appropriate. We must receive a recommendation to process the scholarship application.

SUMMARY EVALUATION

Please circle one in each category. Rating Scale: 1-5 (5 being the highest)

Scholastic / Personal Achievements	1	2	3	4	5	N/A
Attendance at School / Work	1	2	3	4	5	N/A
Performance compared to peers	1	2	3	4	5	N/A
Leadership Ability	1	2	3	4	5	N/A
Participation in Class / Work	1	2	3	4	5	N/A

Please indicate the strength of your overall endorsement of the applicant by circling one rating:

Highly Recommend Recommend Recommend with Some Reservations Not Recommended

COMMENTS

Feel free to comment in the space below or on a separate page any aspect of the applicant's background, experiences, community involvement, etc., that will help the scholarship committee evaluate this individual.

I certify that all information on this form is true and complete to the best of my knowledge. I understand that I may be asked to provide proof of information stated on this form.

Signature _____ Date _____

