

## OPTIMIST SCHOLARSHIP in Memory of DON FELLER

In keeping with the philosophy of the late Mr. Don Feller the Abilene Breakfast Optimist Club has established the Optimist Scholarship in Memory of Don Feller from donations of various individuals and groups. Don was an educator and coach at AHS and was always interested in helping young people to be successful. Therefore the Abilene Breakfast Optimist Club will award a \$500 scholarship to an Abilene High School senior.

The basis for selection is:

1. 2.5 GPA or better in high school;
2. Be of good moral character;
3. Participated in vocational classes at Abilene High School.

This scholarship must be used during the first two semesters of college and within one year of their AHS Graduation Date. If the money is not used within this time frame, it will be awarded to an alternate.

DO NOT WRITE IN THIS SPACE

Application received \_\_\_\_\_

Autobiographical sketch \_\_\_\_\_

Reference letters \_\_\_\_\_

Committee action \_\_\_\_\_

\*\*\*\*\*

Date: \_\_\_\_\_

Name: \_\_\_\_\_  
Last
First
Middle

Address: \_\_\_\_\_

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

**FAMILY INFORMATION:**

Name of father (or guardian) \_\_\_\_\_

Name of mother (or guardian) \_\_\_\_\_

Number of brothers \_\_\_\_\_ their ages \_\_\_\_\_

Number of sisters \_\_\_\_\_ their ages \_\_\_\_\_

Brothers and sisters now in college \_\_\_\_\_

**FUTURE PLANS:**

How many years do you plan to attend college? \_\_\_\_\_

What college are you planning to attend? \_\_\_\_\_

What major course of study do you plan to follow? \_\_\_\_\_

WORK:

What full or part time jobs have you had during the summer or high school?

ATTACH YOUR HONORS-AWARDS-MAJOR-ACTIVITIES SHEET:

LIST THE VOCATIONAL CLASSES YOU HAVE TAKEN AND 3 IMPORTANT LIFE SKILLS YOU HAVE LEARNED FROM TAKING THESE COURSES.

REFERENCES:

List at least three people who can testify as to your eligibility for a scholarship (based on grade average, need and character). We suggest – high school teacher or principal, businessman or former employer. DO NOT USE RELATIVES.

Name	Position	Address
_____	_____	_____
_____	_____	_____
_____	_____	_____

You should contact the above persons and get permission to use their names. Give them a recommendation form with a stamped envelope. Have them return the recommendation form to the Counseling Office by **March 27, 2026**.

Student's Name \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Write below a paragraph telling why you are making application for a scholarship and what you hope to do with your college education.

\_\_\_\_\_  
Student's Signature

## OPTIMIST SCHOLARSHIP in Memory of DON FELLER

Student Name: \_\_\_\_\_ Address: \_\_\_\_\_

The above named student has applied for the **Optimist Scholarship in Memory of Don Feller**. In order to help us complete this application, would you rate the student on each of the following characteristics by circling the number you feel is appropriate in each category. (Remember to compare the student to other students.)

<b>MOTIVATION</b>	Low	1	2	3	4	5	6	7	8	9	High
<b>CITIZENSHIP</b>	Uncooperative	1	2	3	4	5	6	7	8	9	Cooperative, Positive, Follows Rules
<b>INITIATIVE</b>	Needs Prodding	1	2	3	4	5	6	7	8	9	Does More Than Assigned
<b>CONCERN FOR OTHERS</b>	Little	1	2	3	4	5	6	7	8	9	Very Concerned
<b>LEADERSHIP</b>	Follower	1	2	3	4	5	6	7	8	9	Exceptional Leader
<b>RESPONSIBILITY</b>	Not Very Responsible	1	2	3	4	5	6	7	8	9	Highly Responsible
<b>SOCIAL MATURITY</b>	Immature	1	2	3	4	5	6	7	8	9	Outstanding
<b>PERSONAL APPEARANCE</b>	Poor	1	2	3	4	5	6	7	8	9	Always Concerned
<b>FINANCIAL NEED</b>	No Help Needed	1	2	3	4	5	6	7	8	9	Total Help Needed
<b>ESTIMATE OF FUTURE SUCCESS</b>	Low	1	2	3	4	5	6	7	8	9	High

**Additional Remarks:**

In what capacity were you associated with this person? \_\_\_\_\_

Signature \_\_\_\_\_ Position: \_\_\_\_\_

Address \_\_\_\_\_ Date: \_\_\_\_\_

## OPTIMIST SCHOLARSHIP in Memory of DON FELLER

Student Name: \_\_\_\_\_ Address: \_\_\_\_\_

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