

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 **April 2, 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.)

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

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.)

MOTIVATION	Low	1	2	3	4	5	6	7	8	9	High
CITIZENSHIP	Uncooperative	1	2	3	4	5	6	7	8	9	Cooperative, Positive, Follows Rules
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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: _____

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.)

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CITIZENSHIP	Uncooperative	1	2	3	4	5	6	7	8	9	Cooperative, Positive, Follows Rules
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Additional Remarks:

In what capacity were you associated with this person? _____

Signature _____ Position: _____

Address _____ Date: _____