



The objectives of the Parent Teacher Organization of St. Charles North High School are:

- To facilitate communication between SCNHS teachers, administrators/staff, parents, and guardians.
- To support the efforts of SCNHS teachers in providing quality learning experiences and resources for students.
- To endorse activities that generate school spirit and school pride.
- To recognize the academic accomplishments of the SCNHS students.

Based on these objectives the PTO is honored to offer two \$1,000 scholarships to graduating seniors at St. Charles North High School. Two of the PTO's goals are to promote the continuance of higher education and to encourage and recognize the importance of active involvement and commitment to school and community activities. The scholarships will be awarded based on the requirements. Please note that in the event of a tie, the student's weighted GPA will be used to determine the winner.

SCHOLARSHIP REQUIREMENTS

To be eligible for consideration, the SCN student applicant must complete the following requirements and submit this documentation to the CCR office of Rebekah Roberts in a sealed envelope marked PTO Scholarship Application no later than Thursday March 14, 2024.

- Scholarship Application (Appendix A)
- Verification of student application to at least one institute of higher education, vocational or other post high school institution; financial need statements. (Appendix B)
- Personal Essay (Appendix C)
- One-character reference: From a non-relative adult (Appendix D)
- Extra-curricular activity list (Appendix E)
- Applicant and parent or guardian signature page (Appendix F)
- Payment of current year's PTO dues. **Family membership in the PTO for the current year is required for all applicants.** (Current year's dues payment will be verified by PTO Treasurer and must be paid prior to completion of the application evaluators reviews.)

EVALUATION INFORMATION

The judging of all applications will be done confidentially by three individuals who do not have a student or senior family member at St. Charles North High School.

AWARDING OF THE SCHOLARSHIPS

The two scholarship winners will be announced and presented with their award check at the SCN Seniors Honors Night on May 2, 2024.

To keep this information confidential and for the selection committee members to have a chance to review applications without bias, this information will be kept separately from the rest of your application file. The key to your application will be your **student identification number**.

Appendix A: Scholarship Application

Please print legibly, using dark ink or fill in electronically.

Applicant's Name:

Applicant's Student Identification Number:

Applicant's Personal Email Address (Not North):

Father's/Guardian's Name:

Mother's/Guardian's Name:

Parent Email Address:

Home Address:

(Include street, city, and zip code)

Parent Telephone Number: _____

For PTO Use Only: Verification of PTO Membership Dues Payment:

Date Received: _____ Amount Paid: _____

Treasurer Signature: _____

Appendix B: Application to Post High School Institution(s) & Financial Need

Schools/Institutions you have applied for admission:

- _____

Accepted (Yes or No) Scholarship/Award Received (Yes or No)

- _____

Accepted (Yes or No) Scholarship/Award Received (Yes or No)

- _____

Accepted (Yes or No) Scholarship/Award Received (Yes or No)

How do you plan to finance your post high school education program?

Explain any special circumstances that affect your financial situation.

Appendix C: Personal Essay

Complete an essay (300 words or less) in response to the following:

Please describe an experience during your time at St Charles North High School that has provided you with an opportunity for personal growth and helped you towards achieving your goals for the future. This experience may have come from your academic or athletic activities, your community involvement, and/or outside employment.

Organization of your ideas, sincerity, neatness, grammar, and spelling will be considered. Please type or print your essay on this page, or on pages you attach to this page.

Appendix D: One Character Reference

The St. Charles North Parent Teacher Organization requires all students who are applying for this scholarship to request a letter of recommendation from an adult who is not related to the applicant. The adult can be someone from outside of their school environment or from an SCN personnel such as a teacher, guidance counselor, athletic coach, or administrator. **To keep this anonymous, please do not refer to the student by his or her name.**

Please supply a sincere and candid recommendation of the above student regarding his/her motivation, leadership, citizenship, initiative, creativity, and concern for others. Describe your relationship with this student including how long you have known him/her and in what capacities.

The completed recommendation must be returned (in our hand) in confidence by Thursday March 14, 2024, to:

St. Charles North PTO
C/O St. Charles North HS
Attn: CCR Rebekah Roberts
255 Red Gate Road
St. Charles, IL 60175

Appendix E: Extra-Curricular Activity List

List the school and community activities in which you have participated. Please list each activity in one category only. Be specific about your degree of involvement/time commitment to explain your participation in various activities. For example – If you played on a HS and travel team full-time you may not have available time to work. Attach additional page if needed.

[illegible]

Appendix F: Agreement and Signatures

In applying for the St. Charles North Parent Teacher Organization's scholarship, I agree to use any funds awarded to me for tuition or fees related to my post high school education. I also agree to return my scholarship award to the St. Charles North PTO if I decide not to pursue a post high school education program within 1 year after graduation.

By signing this agreement, I certify all the information provided to be accurate and true.

Date: _____

Applicant's printed name: _____

Applicant's signature: _____

Parent/Guardian of applicant's printed name: _____

Parent/Guardian of applicant's signature: _____

Make sure you have proofread your entire application and that all sections are complete before submitting.

**THE COMPLETED APPLICATION IS DUE
THURSDAY MARCH 14, 2024.**