

# Dr. Jean E. Brenchley Woman of Science Award Application

Dr. Jean E. Brenchley Science Award was established through the estate of Dr. Jean E. Brenchley. This award recognizes the achievements of Dr. Brenchley who was a Professor Emeritus, Microbiology and Biotechnology at Penn State University. She was the Director of the Biotechnology Institute at Penn State University. Among many of her honors and awards received, Jean received the Alice Evans Award from the American Society for microbiology for her long standing commitment to the professional development of women in microbiology.

She was a member of the Central Pennsylvania Women's Anglers group and was an avid fly fisherman.

This award is given to a woman in the senior class at Canton Area High School who has demonstrated excellence in academics and who is pursuing science as a career.

#### Eligibility Criteria:

- Graduating female from Canton Area High School.
- Accepted into an accredited university or college.
- Essay (200-250 words double spaced) on what makes you an excellent candidate to pursue a degree in science and why you are passionate about science.
- Excellence in academics.
- Pursuing a degree in science, technology, engineering, math, or biology.
- Please provide a list of school based activities (including leadership positions, clubs and athletics) as well as community volunteer activities and the number of months or years.

Please see your guidance office for deadlines.



## Dr. Jean E. Brenchley Science Award Application

Type or print neatly in black or blue ink. Only complete applications will be considered.

### **Personal Information:**

Last Name	Fi	irst Name	MI		
Street Address				Apt. /Unit Number	
City	State	Zip Code	Home Phone	Cell Phone	
Sex: M F Date of Birth:	// MM/DD/YY	YYY Nar	me of High School	Date of Graduation	
E-mail Address					
Parental Information:					
Father's Last Name	Fire	st Name		MI	
(If different) Street Address	Apt. /	Unit Numbe	er Email Addı	ress	
City	State Z	State Zip Code B		Best Available Phone Number	
Name of Employer			Employed S	Employed Since	
Mother's Last Name	Fir	st Name		MI	
(If different) Street Address	Apt. /Unit Number		er Email Addre	ess	
City	State	Zip Code	Best Available F	Phone Number	
Name of Employer				Employed Since	
Employment Information:					
Do you currently have a part-time	job? Y	N If ye	es:Position		
Name of Employer			Employer's Phone N	umber	



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**School Based Information:** 

# Major Field of study in college: Name of the college or university you will attend: G.P.A.\_\_\_\_\_ SAT Score \_\_\_\_\_ or Act Score \_\_\_\_\_ Class Rank \_\_\_\_\_ of \_\_\_\_ # students. I attest that all personal data included within this application is truthful and in no way misleading. All contents have been completed entirely by me (the applicant) to the best of my knowledge. If I am selected as a recipient of a Community Foundation for the Twin Tiers scholarship, I agree to permit the Foundation to confer with my school to verify my continuing enrollment during the term of my scholarship. I also agree that my name and photograph can be used in announcements made by the Community Foundation for the Twin Tiers regarding the particular scholarship (s) for which I have been awarded. I also agree that by signing this I permit my school to give the Community Foundation for the Twin Tiers information regarding my SAT scores, current GPA and class rank. Awards may be used at any accredited, nonprofit college or university within the United States. Signature of Applicant Date of Signature