

# John H. Hyde, Jr. and Dr. Marcella M. Hyde Scholarship Application

John was the principal at Canton High School from 1961-1983 and Marcella was a teacher and held positions including reading consultant and coordinator, Director of Curriculum and Federal Programs. She also authored the book "Bradford County, The Story of its People".

Eligibility Criteria:

- Graduating senior from Canton Area High School.
- Accepted into an accredited college or university.
- Essay (200-250 words double spaced) on what makes you an excellent candidate to pursue a teaching degree.
- Be in the top 25% of their graduating class.
- Be of high moral character.
- Planning to go into elementary or secondary teaching as a profession.
- 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.



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

### **Personal Information:**

Last Name	First Name				MI
Street Address					Apt. /Unit Number
City	State	Zip Code	Hom	e Phone	Cell Phone
Sex: M F Date of Birth:	/	_/			
	MM/DD/YYYY Name of		of High School	Date of Graduation	
E-mail Address					
Parental Information:					
Father's Last Name	First Name			MI	
(If different) Street Address	erent) Street Address Apt. /Unit Number			Email Address	
City	State Zip Code		Best Available Phone Number		
Name of Employer				Employed S	Since
Mother's Last Name		First N	lame		MI
(If different) Street Address	Apt. /Unit Number		Email Address		
City	State	z Zip C	lode	Best Available	Phone Number
Name of Employer				·	Employed Since
<b>Employment Information:</b>					
Do you currently have a part-time	job? Y	Ν	If yes:		
				Position	
Name of Employer			En	nployer's Phone I	Number



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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