

Rockman's Tuxedo Shop/Babe & George Tymoski Scholarship Application

This scholarship was set up in memory of Babe & George Tymoski who were the proprietors of Rockman's Dress Shop in downtown Sayre for many years. This scholarship is open to graduates of Athens, Sayre or Waverly High Schools. The student must continue their education in a field that will lead to their starting their own business or obtaining a degree in the business field.

Eligibility Criteria:

- Graduating seniors from Athens Area High School, Sayre Area High School, PA or Waverly Central High School, NY.
- Accepted into an accredited institution of higher learning (a 4 year, 2 year or trade school) in the United States.
- Essay (200-250 words doubled spaced) on what makes you an excellent candidate for this scholarship.
- 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.
- A copy of your completed community service project that improved the communities in the Valley and demonstrated your entrepreneurial ability and knowledge.
- The student should be continuing their education in a field that will lead to their starting their own business or obtaining a degree in the business field.

Please E-mail your application in Word or PDF form to: <u>jallenelford@twintierscf.org</u> no later than Monday, March 31, 2025, by 5:00 pm or mail to Community Foundation for the Twin Tiers, 104 W. Lockhart St, Sayre, PA 18840. Mailed application must be postmarked no later than Monday, March 31, 2025.



Rockman's Tuxedo Shop/Babe & George Tymoski Scholarship Application

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

Personal Information:

Last Name	ast Name		First Nam	MI	
Street Add	ress				Apt. /Unit Number
City		St	ate Zip Co	de Home Phone	Cell Phone
Sex: M	F	Date of Birth:			
Graduatior	1	MM	/DD/YYYY	Name of High Schoo	ol Date of

E-mail Address

Parental Information:

Father's Last Name	Firs	st Name	MI Email Address		
(If different) Street Address	Apt.	/Unit Number			
City	State	Zip Code	Best Available Phone	able Phone Number	
Name of Employer			Employed Since		
Mother's Last Name	Fii	rst Name		MI	
(If different) Street Address	Apt. /U	nit Number	Email Address		
City	State	Zip Code	Best Available Phone Nur	nber	
Name of Employer			Employ	yed Since	
Employment Information:					
Do you currently have a part-time	e job? Y	N If ye	es: Position		
			nployer's Phone Number		



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School Based Information:

Major Field of study in college:

Name of the college, university or technical school 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