

# Allegheny High School Local Scholarship Application



## Class of 2012

By completing this application, you will automatically be considered for a number of scholarships awarded by the Allegheny County Education Foundation. Other businesses and/or organizations may also review the applications to select students for consideration to receive money they award.

The local scholarship application may be printed or handwritten (legible!) in ink. Check spelling and fill in all the blanks.

You will notice that you are instructed to write a letter to be included with your application packet. It would be a good idea to ask an English teacher to review the letter before you submit it.

Remember you are competing with your classmates for these scholarships. Neatness, spelling and deadlines do count!

**COMPLETED APPLICATION PACKETS ARE DUE IN THE GUIDANCE OFFICE  
BY  
FRIDAY, MARCH 2, 2012**

## LOCAL SCHOLARSHIP APPLICATION FORM

Student Name: \_\_\_\_\_  
*LAST* *FIRST* *MIDDLE*

Male \_\_\_\_\_ Female \_\_\_\_\_ Date of Birth \_\_\_\_\_

Street Address/PO Box \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Father's Name \_\_\_\_\_  
*First* *Middle* *Last*

Father's Place of Employment \_\_\_\_\_

Mother's Name \_\_\_\_\_  
*First* *Middle* *Last*

Mother's Place of Employment \_\_\_\_\_

Number of family members in your household \_\_\_\_ Number enrolled in college next year \_\_\_\_

I primarily live with my: Father \_\_\_\_\_ Mother \_\_\_\_\_ Both \_\_\_\_\_

Please list sources of income (other than employment listed above) and amounts, including Social Security, Child Support, etc. \_\_\_\_\_

Name(s) of colleges or universities where you have been accepted: *(Please attach a copy of your acceptance letter)* \_\_\_\_\_

College Major/Future Plans: \_\_\_\_\_

Please list college scholarships you have received and amounts: \_\_\_\_\_

checklist:

- \_\_\_\_\_ SAR (Student Assistance Report) from FAFSA or Copy of pages 1-2 of most recent Income Tax Return
- \_\_\_\_\_ Completed application (all questions answered)
- \_\_\_\_\_ Activities and Honors (including high school volunteer hours)
- \_\_\_\_\_ Personal Letter explaining need, special family circumstances, future plans
- \_\_\_\_\_ Copy of college acceptance letter

***(To be completed by the Guidance Office)*** SAT Scores \_\_\_\_\_ Class Rank \_\_\_\_\_ GPA \_\_\_\_\_

Name \_\_\_\_\_ Date Received \_\_\_\_\_

## Absher/Moxley Memorial Scholarship Named for Matthew Absher and Brandon Moxley

The Absher/Moxley Memorial Scholarship is named for two brothers that lost their young lives within a four-year period, due to the adverse effects of prescription drug addiction. Matthew Absher and Brandon Moxley were both deeply beloved by many: their loving family, friends, and Alleghany High School classmates. These two untimely deaths are an extreme loss for our entire community.

The two young men's Uncle Frankie Andrews, Mother Diane Andrews, and Sister Tonya Moxley desire to use this memorial scholarship as a gift to educate and help prevent Alleghany's youth from following the same travesty as his nephews. Frankie Andrews generously initiated this scholarship for the purpose of asking Alleghany High School Seniors to express their thoughts on the perilous path of prescription drug abuse.

Amount of Scholarship: \$250

Requirements:

1. Write a one-page essay on the adverse effects of prescription drug addiction regarding:
  - a. the addict,
  - b. the addict's family, and
  - c. the addict's friends.
2. Present the above written essay as an oral presentation to the Alleghany High School Senior Class at a setting approved by the Alleghany High School Guidance Counselor.
3. Applications will be due as required by the AHS Guidance Counselor. Call 372-5095 for the exact date.
4. The deadline for the written essay and oral presentation is April 29th.

The judges for the recipient of this scholarship will be chosen by the Alleghany High School Counselor.

Name \_\_\_\_\_  
                    First Name                                      Middle Name                                      Last Name

Street Address \_\_\_\_\_

Town \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Daytime Telephone Number \_\_\_\_\_

Please sign and date this application and return it to the AHS Guidance Counselor.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

My name is Frankie Andrews, my sister's name, who many of you may know, is Diane Andrews. I would love to have the opportunity to talk with you about something very near and dear to my heart. In 1986 I was introduced to drugs, not introduced in the way some may think, by taking them, but by the effects the drug user has on a family.

Growing up, I have always been an avid sports fan and my passion for my teams is like nothing I could ever put into words. Being from Maryland, I was and still am, an avid Maryland Terrapin fan.

The year as I stated above was 1986, one of the greatest if not the greatest, Maryland basketball player ever to put on a uniform was Len Bias. He had just been drafted by the Boston Celtics and I was elated to see one of what I considered my own, do so well. Only to wake up a couple of days later to find out Len Bias, had just died of what we later found out, was a cocaine overdose.

I, like many other people, was devastated. Although I was never one to do things like that, rest assured this most definitely scared me enough to never even be around it. I thought at the time, how could his mother and father keep going on and I realized God had a plan for them.

Lonise Bias, is one of the most vocal people out there on the war on drugs. She has lectured all over the world on the effects drugs play on the person taking them and the families of the users.

1986 Crack Cocaine was one of the drug problems many people faced from day to day.

Here we are now, twenty-four years later, still having drug problems. Crack Cocaine and Crystal Meth are just a couple of the problems out there; in my opinion the real problem today is Prescription Medicine.

Now allow me tell you of a story of someone who has endured enough pain to last ten life times, my sister Diane. She is my JOB. For many of you who know the Bible you know JOB lost his seven sons and three daughters and endured a long time of suffering but in the end JOB stayed committed to God.

Well, back to Diane. She has three children, all who graduated from Alleghany High School.

Matthew Absher, who played sports, made very decent grades and graduated. He had a love for basketball like no other. Mountain Dews and Pizza were his favorite foods. As my sister Diane once wrote "He would have been happy to have those for Thanksgiving dinner. I say those things to make you realize that he was a good kid and is human like all of us.

Once out of high school, Matthew faced many of the same obstacles many of our young people today face and we all know them. First, what am I going to do with my life, then there is the peer pressure from our so-called friends to party and then, some of them get introduced to drugs and someone will say to them try this drug; it will relax you or make you feel great.

What starts out as something so innocent can end up as a travesty. This happened to Matthew when he got out of school and faced many of the problems I stated above. On August 22, 2006, I lost my nephew and watched my sister, Matthew's Mother, Diane lose the life that she once knew.

Matthew was first introduced to prescription drugs from a doctor and many times thereafter he continually would go to a doctor for what may have been a real problem only to have a doctor prescribe him some medicine to take the pain away. Between that and his so-called friends he really faced an uphill battle.

For almost four years, I stood back and watched my sister Diane do the best she could do and always wanting to help her if I could.

She still had her daughter Tonya Moxley, who also graduated from Alleghany High School, and her youngest son, Brandon Moxley.

Brandon, as many of you know, was truly a bright light in many people's bad days. I am not sure I ever saw him when he wasn't smiling. Many of you may also remember him for his passion in wrestling. I remember him for being the mischievous one who always tried to act innocent. I also remember him for his willingness to help others, and I know where that came from. His mother Diane has a heart as big as Sparta.

I speak of Brandon now because in less than four years after Matthew had died of prescription drugs, Brandon died the same way.

I know many of you on the outside think this could never happen to you. Well, I am here to say it can! Matthew and Brandon were both very good kids who just got mixed up in the wrong things.

I never feel like our kids fail us, I always feel like we fail them. As I stated at the start of this letter when Lonise Bias lost her son Len to cocaine, everyone and their brother was on the "say no to drugs band wagon." As time has gone by, I feel we as adults, have let this issue take a step back.

I sit and watch my sister everyday feel the pain of losing two kids in less than four years to drugs and I no longer want to sit here and wait for something else to happen.

The reason in writing this letter is that you will allow me, my sister, family, and community to start a Scholarship in the names of Matthew Absher and Brandon Moxley.

I also feel that Matthew and Brandon, who always would try to help someone when help was needed, are saying let us help one more time. I feel it is their way of saying please stay away from drugs.

And like JOB my sister Diane is as committed to God today as she has ever been in her life.

Thank you for your time,  
The Andrews, Absher, and Moxley Family



11. Financial need

a. Approximate family income per year (check one)

- below \$10,000                       \$10,000 to \$20,000  
 \$20,000 to \$30,000                 \$30,000 to \$40,000  
 \$40,000 to \$50,000                 above \$50,000

b. Approximate tuition and fees per year for school/university:

\_\_\_\_\_

c. Employment during school or summer: \_\_\_\_\_

Expected earnings: \_\_\_\_\_

c. How do you plan to finance your education? \_\_\_\_\_

\_\_\_\_\_

12. Scholarship potential

A: Attach high school or college transcripts

B: List scholarships applied for or received

\_\_\_\_\_

\_\_\_\_\_

13. References (Attach three (3) letter of reference)

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

**Previous applicants and/or recipients may reapply each year that they remain in school.**

Alleghany County  
Christmas Tree Growers Association, Inc.  
PO Box 892, Sparta, North Carolina 28675

**Statement of Scholarship Program**

The Alleghany Christmas Tree Growers Association membership voted in 2005 to establish an annual scholarship from funds of the Association to be given to a student of Alleghany High School to pursue a higher education. The conditions and requirements of the scholarship are as follows:

**(I) Description of Scholarship**

Funds for one or more scholarships shall be made available each year, each in the amount of \$500.00.

The scholarship is a one-time, non-renewable award, but each person meeting the criteria shall be allowed to reapply in succeeding years. The scholarship shall be open to any graduating senior or past recipient of the scholarship.

The scholarship recipient shall be chosen by a scholarship committee, which shall be appointed by the Board of Directors of the Association at their sole discretion.

Recipients shall be chosen based on academic promise and financial need. Consideration shall be given to those students entering a college or university program in an agricultural, horticultural, or forestry field.

**(II) Qualifications**

The award of the scholarship will be based on the applicant's academic records, participation in school activities, community and church service, college major, and work experience.

**(III) Application Process**

Applications shall be available from the Guidance Office at Alleghany High School or Alleghany Extension Center.

Applications will be due as required by the AHS Guidance Counselor. Call 372-5095 for the exact date.

Announcement of the scholarship award shall be made at Alleghany High School Scholarship Awards Assembly.

#### **(IV) Selection Process**

Each recipient shall be chosen by the Scholarship Committee of the Association as appointed by the Association's Board of Directors. This committee shall meet as needed to adequately administer the scholarship.

All eligible applicants will be considered without regard to race, age, color, religion, sex, or national origin.

#### **(V) Payment of Scholarship Funds**

The Association's Treasurer shall make payment of any scholarship funds awarded directly to the recipient.

#### **(VI) Change of Criteria and Terms**

The criteria and terms of this scholarship shall be amended as needed from time to time by a majority vote of the then serving Board of Directors of the Association at a duly called meeting thereof.



Number of Family Members at home (including you): \_\_\_\_\_

Extracurricular Activities: List any sports, clubs, etc. and years of participation. Include any elected offices held.

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Community, volunteer, and church activities, including any offices held:

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List any work experience:

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Please furnish two (2) letters of recommendation from a school official, employer, or community leader.

Also, please furnish a current grade transcript.



**ALLEGHANY HOME BUILDERS ASSOCIATION SCHOLARSHIP  
APPLICATION FORM**

ALL INFORMATION WILL BE KEPT IN STRICT CONFIDENCE

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone #: \_\_\_\_\_

Age: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Mother's Name: \_\_\_\_\_

Father's Place of Employment: \_\_\_\_\_ Income: \_\_\_\_\_

Mother's Place of Employment: \_\_\_\_\_ Income: \_\_\_\_\_

Additional Sources of Income, including Social Security: \_\_\_\_\_

\_\_\_\_\_

Name(s) of college(s) where you have been accepted: \_\_\_\_\_

Name of college you plan to attend: \_\_\_\_\_

Course of study you plan to pursue: \_\_\_\_\_

Scholarships you have received and the amount: \_\_\_\_\_

Number of students in your graduating class: \_\_\_\_\_ Your class rank: \_\_\_\_\_

Class offices held and year: \_\_\_\_\_

\_\_\_\_\_

Honors received and year: \_\_\_\_\_

\_\_\_\_\_

School activities: \_\_\_\_\_

\_\_\_\_\_

Community activities: \_\_\_\_\_

Special Interests/Hobbies: \_\_\_\_\_

Briefly state your career goals: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Applicant's Signature: \_\_\_\_\_

# Alleghany Retired School Personnel Scholarship

## Publicity

The scholarship will be awarded during the Awards Day at Alleghany High School by a representative from the Alleghany Unit of Retired School Personnel.



## Final Authority

The Scholarship Committee has the authority to render final decisions regarding any questions or disagreements.

The Alleghany Retired School Personnel Scholarship was established in September, 1988, as a memorial to deceased members of the Alleghany unit of North Carolina Retired School Personnel.

“To improve the golden moment of opportunity and catch the good that is within our reach is the great art of life.”

*Samuel Johnson*

Applications will be available in January. Applications will be due as required by the AHS Guidance Counselor. Call 372-5095 for the exact date.

**Description**

The Alleghany Retired School Personnel Scholarship of \$500 will be awarded annually, excluding the years covered by the District Scholarship. Applicants should be planning to enter the field of education.

**Criteria**

- 1. Plans to become a teacher or enter a field related to education 20%
- 2. Scholastic Achievements and School Records 40%
- 3. Financial Need 40%

**Selection Procedure**

Selection will be made by the Scholarship Committee composed of three (3) active members of the Alleghany County Retired School Personnel appointed by the president.

The first runner-up will be selected in the event the original recipient should forfeit the rights of the scholarship.

Applications will be available in January. They are due in the Guidance Office March 5.

**Payment of Scholarship**

Funds will be handled by the Alleghany County Educational Foundation.



ALLEGHANY RETIRED SCHOOL PERSONNEL APPLICATION

Name \_\_\_\_\_  
Last First Middle Telephone

Address \_\_\_\_\_  
Route or Street Box City State Zip Code

Age \_\_\_\_\_ Date of Birth \_\_\_\_\_ Sex \_\_\_\_\_

Father's Name \_\_\_\_\_ Living \_\_\_\_ Deceased \_\_\_\_  
Last First Middle

Mother's Name \_\_\_\_\_ Living \_\_\_\_ Deceased \_\_\_\_  
Last First Middle

Brothers \_\_\_\_\_ Age \_\_\_\_\_ Sisters \_\_\_\_\_ Age \_\_\_\_\_

Father's Place of Employment \_\_\_\_\_ Taxable Income \_\_\_\_\_

Mother's Place of Employment \_\_\_\_\_ Taxable Income \_\_\_\_\_

Scholarships received and amounts \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of college or university you plan to attend \_\_\_\_\_  
\_\_\_\_\_ Accepted \_\_\_\_ yes \_\_\_\_ no

Course of Study \_\_\_\_\_

Grade Average \_\_\_\_\_ Class Rank \_\_\_\_\_ Number in Class \_\_\_\_\_

School and Community Activities and Honors: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Work Experience \_\_\_\_\_  
\_\_\_\_\_

Please include the following:

1. Letter stating the reason for applying for the scholarship and plans for the future. MUST PLAN TO TEACH.
2. Transcript of high school grades.

ALL APPLICANTS SHALL BE CONSIDERED WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, OR NATIONAL ORIGIN.

# FIRST BAPTIST CHURCH

240 S. Main Street  
Sparta, N.C.

## THE MARJORIE ARMENTROUT EDUCATION SCHOLARSHIP PROGRAM

### INTRODUCTION

The Marjorie Anmentrout Scholarship honors the memory of the long time organist of First Baptist Church, Sparta, N.C.

Marjorie's love of God and music, along with her personality and dedication to her church, inspired our worship services throughout her years of service. She taught music to many children in and around Alleghany County, as well as being a teacher and artist. Helping a student to continue his/her education will be a way to remember this special lady.

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### PROCEDURES

A scholarship will be awarded to a graduating senior of Alleghany High School, Sparta, N.C., who plans to major or minor in the field of music, education or art.

Funding for the Scholarship Program will come mainly from donations given by members of First Baptist Church, although funding may also come from members of the community.

An application form will be kept in the Guidance Department at Alleghany High School and will be announced to the seniors each year. Applications may also be obtained in the church office.

Applications will be due as required by the AHS Guidance Counselor. Call 372-5095 for the exact date.

Applications will be reviewed by the Scholarship Committee of the Chancel Choir.

The chosen recipient of the scholarship will be notified by mail.

The scholarship will be awarded on the basis of scholastic achievement and community involvement. Financial need will also be assessed. Membership in the Baptist Church is not a requirement.

The scholarship money will be sent directly to the university or college the student will attend. If the student terminates his/her education, any unused scholarship money will be returned to First Baptist Church, P.O. Box 668, Sparta, N.C., 28675 - Armentrout Scholarship Program.

The scholarship is renewable on the condition that the recipient continues in school and receives passing grades. Another application must be submitted by March 5th to renew in subsequent years.

FIRST BAPTIST CHURCH  
Sparta, N.C.

MARJORIE ARMENTROUT EDUCATION SCHOLARSHIP PROGRAM

APPLICATION FORM

Name: \_\_\_\_\_ Birth-date: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Graduating Senior @ Alleghany High School: Yes \_\_\_\_\_ No \_\_\_\_\_

Parent's names: \_\_\_\_\_

Address & phone #, if different: \_\_\_\_\_

Instrument(s) played: \_\_\_\_\_

Private music teacher(s): \_\_\_\_\_ Phone #: \_\_\_\_\_

\_\_\_\_\_ Phone #: \_\_\_\_\_

Number of years studying music/art: \_\_\_\_\_

Name of university/college(4 years): \_\_\_\_\_

Address: \_\_\_\_\_

Name of college(2 years): \_\_\_\_\_

Address: \_\_\_\_\_

Have you been accepted (enclose a copy of acceptance)? Yes \_\_\_\_\_ Not yet \_\_\_\_\_ No \_\_\_\_\_

Major field of study: \_\_\_\_\_

Minor field of study: \_\_\_\_\_

Write a short paragraph of your life's goals and how you plan to use your musical or art talent and/or teaching.

**Della S. Brooks / Hattie B. Joines  
Scholarship**

*It is our expectation that recipients of  
this scholarship will use their talent to  
support this community.*

**As recipients of similar scholarships when they  
were students at Alleghany High School,  
Joseph F. Fielder ('92) and  
Khristina J. Fielder ('93) established this  
scholarship in honor of their grandmothers,  
Della S. Brooks and Hattie B. Joines.**

**Purpose**

The Della S. Brooks / Hattie B. Joines Scholarship in the amount of \$1,000 is awarded annually to a graduating senior from Alleghany High School who has already positively affected this community and who has the potential to profoundly affect this community. Indicia of this potential include outstanding academic achievement and demonstrated energetic leadership in the classroom, school and community. Preference is given to men and women who, without financial assistance, would find it difficult to obtain a college education.

**Criteria** (weighted by the selection committee)

Financial need (taking into account simultaneously-awarded scholarships), character, scholastic achievement, teacher references, leadership and community involvement.

**Selection**

The award recipient will be selected by the scholarship committee or other people selected by Joseph and Kristina Fielder. The recipient must be accepted by an accredited two-year or four-year institution of higher learning.

**Announcement**

The scholarship will be awarded annually during the Awards Day ceremony at Alleghany High School. After the winner is announced, he or she will be expected to sign a written acknowledgement of acceptance in the guidance office.

**Dates to Remember**

Applications will be due as required by the AHS Guidance Counselor. Call 372-5095 for the exact date. August / Sept. - Recipients' college notifies guidance counselor

**Applicant Information**

Name: \_\_\_\_\_  
Telephone No: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Father's Name: \_\_\_\_\_  
Living Deceased

Mother's Name: \_\_\_\_\_  
Living Deceased

Father's Employment: \_\_\_\_\_

Mother's Employment: \_\_\_\_\_

Father's Taxable Income: \$ \_\_\_\_\_

Mother's Taxable Income: \$ \_\_\_\_\_

**Other Scholarships Awarded and Amount:**

- 1. \_\_\_\_\_ (\$ \_\_\_\_\_ )
- 2. \_\_\_\_\_ (\$ \_\_\_\_\_ )
- 3. \_\_\_\_\_ (\$ \_\_\_\_\_ )

**College you Plan to Attend:**

Name: \_\_\_\_\_  
Accepted: Yes No

GPA: \_\_\_\_\_

Class Rank: \_\_\_\_\_ of \_\_\_\_\_

Please include copies of the following with your completed application:

- 1. Letter stating reason for applying and your plans for the future
- 2. High school transcript

**Applicant Details**

High School Achievements: \_\_\_\_\_  
\_\_\_\_\_

Sports / Hobbies / Clubs /Offices Held: \_\_\_\_\_  
\_\_\_\_\_

Community / Church Involvement: \_\_\_\_\_  
\_\_\_\_\_

Other Interests: \_\_\_\_\_  
\_\_\_\_\_

**Teacher References**

Name: \_\_\_\_\_  
Telephone No: \_\_\_\_\_  
Class Taught: \_\_\_\_\_

Name: \_\_\_\_\_  
Telephone No: \_\_\_\_\_  
Class Taught: \_\_\_\_\_

\*Please get permission from both teachers listed above **before** listing them on this application.

Signed: \_\_\_\_\_

# Patyrae Reeves Basic Scholarship

Amount of Scholarship: \$1,000

Patyrae Reeves Basic was born and raised in Alleghany County. Her parents were farmers. Mrs. Basic attended elementary school at Toliver, a one-room schoolhouse located in the Twin Oaks Community, and graduated from Sparta High School. Her dream was to become a teacher. She graduated from Appalachian State Teachers College and enjoyed a 34-year teaching career in the Alleghany School System, teaching several generations of students. At one time in her career, she stated both bosses, the Superintendent of Schools and Principal had been her students. She married Glenn Basic and had three children. She continued to be interested in education after her retirement and was a big fan of ASU Football. She passed on January 30, 2010.

This scholarship is in conjunction with the Alleghany VFW Ladies' Auxiliary. The Patyrae Reeves Basic Scholarship is intended to assist a student desiring to become a teacher, and realize their dream, just as Mrs. Basic did. The contact is Mrs. Basic's daughter, Glenda Ham.

Name \_\_\_\_\_  
First Name Middle Name Last Name

Street Address \_\_\_\_\_

Town State Zip Code

Daytime Telephone Number \_\_\_\_\_

Please sign and date this application and return it to the AHS Guidance Counselor.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**APPLICATION**

1. Name: \_\_\_\_\_
  2. Telephone: \_\_\_\_\_
  3. Address: \_\_\_\_\_  
\_\_\_\_\_
  4. Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Sex Male \_\_\_\_\_ Female \_\_\_\_\_
  5. Father's Name: \_\_\_\_\_  
Living: \_\_\_\_\_ Deceased: \_\_\_\_\_
  6. Mother's Name: \_\_\_\_\_  
Living: \_\_\_\_\_ Deceased: \_\_\_\_\_
  7. Please list all other scholarships that you have received and the amounts:  
\_\_\_\_\_  
\_\_\_\_\_
  8. Name of college or university that you plan to attend:  
\_\_\_\_\_  
Major: \_\_\_\_\_  
Accepted: \_\_\_\_\_ Yes \_\_\_\_\_ No
  9. Number of students in your graduating class: \_\_\_\_\_ Your rank: \_\_\_\_\_
  10. Offices and honors during high school: \_\_\_\_\_
  11. Clubs during high school: \_\_\_\_\_
  12. Sports and other activities: \_\_\_\_\_
  13. Please include the following with this application:
    - A. Letter stating reason for applying for the scholarship and plans for the future.
    - B. Transcript of high school grades
- Applicant's Signature: \_\_\_\_\_

**DR. BILL DEBORD, DVM  
SCHOLARSHIP**

Dr. DeBord was truly a special person to many animals and to their owners in Alleghany and surrounding counties. He tirelessly practiced veterinary medicine for over twenty years. He was compassionate and caring - characteristics that were visible with his wife Ann and his sons Danny and Willie as well. Dr. DeBord had a tremendous influence in many people's lives - both young and old. He was a doctor of veterinary medicine twenty-four hours a day, seven days a week.

Dr. DeBord grew up in Rich Valley, Virginia. He attended Emory and Henry College and then entered the University of Georgia's veterinary program. After graduating from the University of Georgia, Dr. DeBord moved to Independence, Virginia in 1980 to begin practicing veterinary medicine along side Dr. Nash Williams. During his professional career, Dr. DeBord strived to educate his clients, comforted grieving clients, mentored veterinary students, and worked countless nights, weekends, and holidays that we all came to depend on.

It is because of his dedication that a scholarship has been established in Dr. DeBord's honor. It is our hope that deserving students from Alleghany and Grayson Counties who have aspirations of becoming a veterinarian or pursuing a professional degree in agriculture will receive this memorial in honor of Dr. DeBord's dedication to his profession.

## **PURPOSE**

This annual scholarship of \$500 is intended to aid two graduating seniors from Alleghany High School and Grayson High School in becoming doctors of veterinary medicine or to pursue an education in agriculture.

## **ELIGIBILITY**

1. Students planning to become veterinarians.
2. Students planning to pursue an education in agriculture.
3. Students entering vocational-agriculture fields.

## **SELECTION PROCEDURE**

Selection is made by the DeBord Scholarship committee composed of the following:

- A. Guidance Counselor
- B. Ann Watson DeBord
- C. Selected teachers
- D. Selected Friends

## **CRITERIA**

1. Financial Need
2. Scholarship achievement
3. Interview
4. Teacher Recommendation

Recipient must be accepted in a 2 or 4 Year College or university, with the intention of becoming a veterinarian or pursue a career in a related field.

## **PAYMENT**

Payment shall be made to college or university; half at the beginning of the first semester and half at the beginning of the second semester.

## **ANNOUNCEMENTS**

The Scholarship will be awarded each year during Awards Day Assembly at Alleghany High School and Grayson County High School.

## **DATES TO REMEMBER**

Applications will be due as required by the AHS Guidance Counselor. Call 372-5095 for the exact date.

May/June      Announcement of winner at Awards Day Assembly

Recipient signs acceptance in Guidance Office

**APPLICATION**

1. Name: \_\_\_\_\_ Telephone: \_\_\_\_\_
2. Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ Zip: \_\_\_\_\_
3. Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: Male \_\_\_\_ Female \_\_\_\_
4. Father's Name: \_\_\_\_\_ Living \_\_\_\_ Deceased \_\_\_\_
5. Mother's Name: \_\_\_\_\_ Living \_\_\_\_ Deceased \_\_\_\_
6. Number of Brothers: \_\_\_\_\_ Number of Sisters: \_\_\_\_\_
7. Father's Place of Employment: \_\_\_\_\_
8. Mother's Place of Employment: \_\_\_\_\_
9. Family Income: (after tax deduction) \_\_\_\_\_
10. Please list all other scholarships that you have received and the amounts: \_\_\_\_\_  
\_\_\_\_\_
11. Name of College or University that you plan to attend: \_\_\_\_\_  
\_\_\_\_\_ Major \_\_\_\_\_ Accepted: \_\_\_\_ Yes \_\_\_\_ No
12. Number of students in your graduating class: \_\_\_\_\_ Your rank: \_\_\_\_\_
13. Offices and honors during high school: \_\_\_\_\_  
\_\_\_\_\_
14. Clubs during high school: \_\_\_\_\_
15. Sports and other activities: \_\_\_\_\_  
\_\_\_\_\_
16. Please include the following:  
A. Letter stating reason for applying for the scholarship and plans for the future.  
B. Transcript of high school grades

Applicant's Signature: \_\_\_\_\_

**FELMET/  
HAMPTON  
SCHOLARSHIP**

Felmet / Hampton Scholarship Fund was established by family members and friends in memory of Jack W. Felmet and Joe Blake Hampton. These two outstanding teachers were tremendous, positive influences on the agriculture students of Alleghany High School for over twenty years. Through their hard work and dedication to Alleghany County, an excellent vocational agriculture program with first rate facilities has been provided for students. Their influence made the difference between a good program and an excellent program.

## **PURPOSE**

This annual scholarship of \$500-\$1000 is intended to aid graduating seniors of Alleghany High School in becoming teachers of vocational agriculture or other vocational areas.

## **ELIGIBILITY (Prioritized)**

1. Student planning to become teachers of vocational agriculture.
2. Student entering other vocational areas.
3. Student entering a two - year program in agriculture or other vocational area.
4. Student entering teaching in any other field.

## **SELECTION PROCEDURE**

Selection in made by the Felmet / Hampton Scholarship Committee composed of the following:

- A. Chairman of the Agriculture Department
- B. Three representatives of other vocational departments

## **CRITERIA**

1. Financial need
2. Scholarship achievement
3. Interview
4. Teacher recommendation

Recipient must be accepted in an accredited 2-or 4- year college or university, preferably with the intention of becoming a vocational teacher or work in a vocational field.

The first runner - up will be selected in the event the original recipient should forfeit the rights to the scholarship.

## **PAYMENT**

Payment shall be made directly to the student for college tuition; half at the beginning of the first semester and half at the beginning of the second semester.

## **ANNOUNCEMENTS**

The scholarship will be awarded each year during Awards Day Assembly at Alleghany High School (by a member of the scholarship committee)

## **DATES TO REMEMBER**

Applications will be due as required by the AHS Guidance Counselor. Call 372-5095 for the exact date.

May / June      Announcement of winner at Awards Day Assembly

Recipient signs acceptance in Guidance Office



## Mt. Zion United Methodist Church

### Ruth Hendrix Scholarship

Gary L. Camp, Pastor

#### Guidelines

1. The Scholarship will be awarded to students from high school or college to help further their education.
2. The scholarship will be awarded according to the following priorities:
  - 1) Members and or relatives of members of Mt. Zion UMC.
  - 2) High School Seniors who live in the Mt. Zion community.
  - 3) Recommendation from the appropriate Guidance Counselor.
3. Scholarship funds shall be paid directly to the college or university.
4. All scholarship recipients shall apply each year for the scholarship. This entails supplying the Scholarship Committee with information concerning your status at your school. A copy of the student's most recent grade report and the expected date of graduation should be remitted each semester.
5. Scholarship recipients attending a four year college will receive \$2,000.00 per year (\$1,000.00 per semester) for a maximum of four years.
6. Scholarship recipients attending a community college will receive \$1,200 per year (\$600.00 per semester) for a maximum of two years.
7. A student that desires to attend a community college on a half-time basis (6 semester hours) may be awarded \$300.00 per semester.
8. A scholarship recipient that attends a college or university for at least one semester and decides to change to a community college will receive \$600.00 for one year.
9. Contingencies (illness or death in the immediate family, etc.) arises in all our lives. A scholarship recipient that drops out of school without a valid reason will receive no further support from Mt. Zion UMC.
10. Your application must be submitted to the Mt. Zion Scholarship Committee by April 15th of each year for new applicants and grades need to be received within thirty days of their posting in the case of re-application.
11. The decision of the Scholarship Committee is final.
12. Mt. Zion United Methodist Church does not discriminate on the basis of race, national origin, or economic condition.

Dorothy Templeton, Scholarship Chair  
392 Spicer Mountain Road  
Sparta, NC 28675

Revised 2/8/08



**Minnie Lou Edwards Irwin Scholarship  
Application**

**Minnie Lou Edwards Irwin  
Scholarship**

**1. Name:** \_\_\_\_\_  
*Last First Middle Telephone*

**2. Address:** \_\_\_\_\_  
*Route or Street Box City State Zip Code*

**3. Age:** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_ **Sex: M** \_\_\_\_\_ **F** \_\_\_\_\_

**4. Father's Name** \_\_\_\_\_ **Living** \_\_\_\_\_ **Deceased** \_\_\_\_\_  
*Last First Middle*

**5. Mother's Name** \_\_\_\_\_ **Living** \_\_\_\_\_ **Deceased** \_\_\_\_\_  
*Last First Middle*

**6. Number of Brothers** \_\_\_\_\_ **Number of Sisters** \_\_\_\_\_

**7. Father's Place of Employment** \_\_\_\_\_

**8. Mother's Place of Employment** \_\_\_\_\_

**9. Family Income** \_\_\_\_\_ **(after tax deduction)**

**10. Please list all other scholarships that you have received and the amounts:** \_\_\_\_\_  
\_\_\_\_\_

**11. Name of college or university that you plan to attend:** \_\_\_\_\_

\_\_\_\_\_ **Accepted: Yes** \_\_\_\_\_ **No** \_\_\_\_\_

**12. Course of study that you plan to pursue:** \_\_\_\_\_ **Grade Av.** \_\_\_\_\_

**13. Number of students in your graduating class:** \_\_\_\_\_ **Your rank** \_\_\_\_\_

**14. Offices and honors during high school:** \_\_\_\_\_  
\_\_\_\_\_

**15. Clubs during high school:** \_\_\_\_\_  
\_\_\_\_\_

In 1985, the Minnie Lou Edwards Irwin Scholarship was established by her children, John Ulus Irwin, Jr., Mrs. Jane Brumbaugh, and Nickolas E. Irwin, and Ulus Irwin, her husband, as a meaningful way to honor her contributions to the field of education.

"I will study and get ready, and perhaps my chance will come" - *LINCOLN*

**16. Sports and other activities:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**17. Hobbies:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**18. Please include the following:**

1. Letter stating reason for applying for the scholarship and plans for the future.
2. Transcript of high school grades

\_\_\_\_\_  
*Applicant Signature*

*All applicants shall be considered without regard to race, color, religion, sex, or national origin.*

**Purpose**

This annual scholarship of \$500 is to aid a senior from Alleghany High School with limited resources but a desire to further his or her education. The graduate must be accepted by an accredited two or four year college or university.

**Selection Procedures**

The selection is made by the Scholarship Committee composed of the following:

- a. Principal of Alleghany High School
- b. Guidance Counselor of Alleghany High School
- c. Chairman of the Science Department at Alleghany High School
- d. Honoree or a member of her family

**Criteria**

- a. Definite need for financial assistance . . . . . 50%
- b. Scholastic Achievement. . . . . 30%
- c. Interview and school activities . . . . . 10%
- d. Teacher recommendation. . . . . 10%

The first runner-up will be selected in the event the original recipient should forfeit the rights to the scholarship.

**Announcement**

The scholarship will be awarded each year during Awards Day at Alleghany High School by a member of the family or the Chairman of the Alleghany High School Science Department. After the winner is announced, he or she will be expected to sign an acceptance in the Guidance Office.

**Dates to Remember**

Applications will be due as required by the AHS Guidance Counselor. Call 372-5095 for the exact date.

- |                  |   |
|------------------|---|
| May/June         | Announce winner at the Awards Assembly. The winner signs an acceptance in the Guidance Counselors Office. |
| August/September | Recipient has college to notify Guidance Counselor.   |

## NCAE Scholarship Application

Name \_\_\_\_\_

Parent/Guardian \_\_\_\_\_

Plans for Post Secondary Education \_\_\_\_\_

Please submit a 1 page essay addressing the following question:

Why is furthering your education important to you?

Criteria and points to determine recipient:

- Scholastic Achievement (30 pts)
  - a. Grade Average (A=10, B=7, C=4)
  - b. Class Rank (Top 5%=10, 2nd 5%=7, 25%=4)
  - c. SAT/ACT Scores 1200=10, 1000=7, 800=4 (CR & M)
- Activities and Honors (30 pts possible)
- Community Involvement/Volunteer Hours (15 pts)
- Essay (15 pts)
- Parent an NCAE Member (20 pts)

**APPLICATION**

1. Name: \_\_\_\_\_ Telephone: \_\_\_\_\_
2. Address: \_\_\_\_\_  
\_\_\_\_\_ Zip: \_\_\_\_\_
3. Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: Male \_\_\_ Female \_\_\_
4. Father's Name: \_\_\_\_\_ Living \_\_\_ Deceased \_\_\_
5. Mother's Name: \_\_\_\_\_ Living \_\_\_ Deceased \_\_\_
6. Number of Brothers: \_\_\_\_\_ Number of Sisters: \_\_\_\_\_
7. Father's Place of Employment: \_\_\_\_\_
8. Mother's Place of Employment: \_\_\_\_\_
9. Family Income (after tax deduction): \_\_\_\_\_
10. Please list all other scholarships that you have received and the amounts: \_\_\_\_\_  
\_\_\_\_\_
11. Name of College or University that you plan to attend: \_\_\_\_\_  
\_\_\_\_\_ Major \_\_\_\_\_ Accepted: \_\_\_ Yes \_\_\_ No
12. Number of students in your graduating class: \_\_\_\_\_ Your rank: \_\_\_\_\_
13. Offices and Honors during high school: \_\_\_\_\_  
\_\_\_\_\_
14. Clubs during high school: \_\_\_\_\_
15. Sports and other activities: \_\_\_\_\_
16. Please include the following:  
A. Letter stating reason for applying for the scholarship and plans for the future.  
B. Transcript of high school grades

Applicant's Signature: \_\_\_\_\_

**E. J. PUGH  
SCHOLARSHIP**

**The E. J. Pugh Scholarship**  
was established by the Sparta  
Masonic Lodge #423 to honor  
the memory of E. J. Pugh

## PURPOSE

The E. J. Pugh Scholarship is presented annually to a graduating senior from Alleghany High School. The \$500 scholarship is intended to aid a student with limited resources who has a desire to further his or her education. The graduate must be accepted by an accredited 2 or 4 year college or university.

## SELECTION PROCESS

The recommendations are made by the scholarship committee who is appointed each year.

## CRITERIA

- |                            |     |
|----------------------------|-----|
| a. Financial need          | 50% |
| b. Scholarship achievement | 30% |
| c. Interview               | 10% |
| d. Teacher recommendation  | 10% |

## ANNOUNCEMENT

The scholarship will be awarded each year during the Awards Assembly at Alleghany High School by the Master of the Sparta Masonic Lodge #423. After the winner is announced, he or she will be expected to sign an acceptance in the Guidance Office.

## DATES TO REMEMBER

Applications will be due as required by the AHS Guidance Counselor. Call 372-5095 for the exact date.

May/June      Announcement of winner at the Awards Assembly

Aug/Sept.      Recipient has college to notify the Guidance Counselor

**Alleghany High School Scholarship Awarded  
by the Sparta United Methodist Women  
of Sparta United Methodist Church**

Amount of Scholarship: \$1,500

Eligibility Requirements:

1. Student graduating from Alleghany High School
2. Attends or is a member of Sparta United Methodist Church
3. Have qualified for entrance to a two-year or technical community college program or a four-year college or university
4. Provide to the guidance counselor documentation exhibiting financial need
5. Exhibit scholastic achievement, leadership qualities and participate in community and school activities.
6. Submit a letter of recommendation from a high school principal, guidance counselor, or teacher with the application.
7. Must show financial need.

This scholarship would plan to renew each year based upon the student's continuing need.

Margaret Connor is the contact person for this scholarship.

Name \_\_\_\_\_  
                    First Name                      Middle Name                      Last Name

Street Address \_\_\_\_\_

Town                                      State                                      Zip Code

Daytime Telephone Number \_\_\_\_\_

Please sign and date this application and return it to the AHS Guidance Counselor.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

13. Number of students in your graduating class: \_\_\_\_\_

Your rank \_\_\_\_\_

14. Offices and honor during high school: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

15. Clubs during high school: \_\_\_\_\_

\_\_\_\_\_

16. Sports and other activities: \_\_\_\_\_

\_\_\_\_\_

17. Hobbies: \_\_\_\_\_

\_\_\_\_\_

**18. Please include the following**

1. Letter stating reason for applying for the scholarship and plans for the future.
2. Transcript of high school grades

\_\_\_\_\_  
Applicant Signature

ALL APPLICANTS SHALL BE CONSIDERED WITHOUT REGARD TO  
RACE, COLOR, RELIGION, SEX, OR NATIONAL ORIGIN.

# MR. AND MRS. F. H. SPRY MEMORIAL SCHOLARSHIP

Given in memory of Fletcher H. and Gertrude P. Spry in recognition of their leadership and contributions to community development and education in the Turkey Knob/Piney Creek area and Alleghany County.



Sponsored by:  
Piney Creek FFF Association

Contact Person: Carol Kennedy

MR. AND MRS. F. H. SPRY MEMORIAL SCHOLARSHIP  
APPLICATION

Purpose

This scholarship of approximately \$500 is to assist an Alleghany High School senior from the Piney Creek/Turkey Knob section of the county to continue his or her education.

Selection Procedures

The selection is made by the Scholarship Committee composed of the following:

1. Carol Kennedy
2. Ben Rogers
3. Evelyn Hash

The money will be awarded upon the student's enrollment in college.

Criteria

The student receiving the scholarship:

1. Must have been accepted at an accredited 2 or 4-year college
2. Must not be opposed to hunting
3. Preference will be given to:
  - a. residents of Turkey Knob/Piney Creek section of the county
  - b. students with financial need
  - c. majors in forestry, wildlife, medicine, or education

Schedule

Applications will be due as required by the AHS Guidance Counselor. Call 372-5095 for the exact date.

1. Name: \_\_\_\_\_  
*Last First Middle Telephone*

2. Address: \_\_\_\_\_ NC \_\_\_\_\_  
*Route or Street Box City Zip Code*

3. Age: \_\_\_\_\_ Date of Birth \_\_\_\_\_ Sex: M \_\_\_\_\_ F \_\_\_\_\_

4. Father's Name \_\_\_\_\_ Living \_\_\_\_\_ Deceased \_\_\_\_\_  
*Last First Middle*

5. Mother's Name \_\_\_\_\_ Living \_\_\_\_\_ Deceased \_\_\_\_\_  
*Last First Middle*

6. Number of Brothers \_\_\_\_\_ Number of Sisters \_\_\_\_\_

7. Father's Place of Employment \_\_\_\_\_

8. Mother's Place of Employment \_\_\_\_\_

9. Family Income \_\_\_\_\_ (after tax deduction)

10. Please list all other scholarships that you have received and the amounts: \_\_\_\_\_

11. Name of college or university that you plan to attend: \_\_\_\_\_

Accepted: Yes \_\_\_\_\_ No \_\_\_\_\_

12. Course of study that you plan to pursue: \_\_\_\_\_

\_\_\_\_\_ Grade Av. \_\_\_\_\_



# ***JOSEPH JONES / SHELL OIL SCIENCE AND MATH SCHOLARSHIP PROGRAM***

## **History:**

This program was initiated in 1999 by Joseph Jones. In subsequent years, the endowment has grown from annual contributions and matching funds from the Shell Oil Company Foundation. The scholarship funds are deposited with, managed, and dispersed by the Alleghany County Educational Foundation, Inc.

## **Objective:**

- (1) To encourage Alleghany County High School students to seek careers in science, mathematics, technology, and engineering.
- (2) To encourage students, particularly as sophomores and juniors, to select appropriate courses, excel academically, and to seek admission into qualified universities.

## **Description of Scholarship:**

The scholarship(s) are open to any graduating Alleghany High School senior who meets the qualifications below. The scholarship is a one-time, non-renewable award. The amount of the scholarship may range from \$1,000 to \$5,000 and will be determined by the Alleghany County Educational Foundation Selection Committee.

## **Qualifications:**

Students must be accepted by and attend a four year college or university that grants a Bachelor of Science (BS) degree.

Students must show they have already selected a major in science, mathematics, technology, or engineering. Examples of specific majors include: chemistry, bio-chemistry, biology, entomology, electrical engineering, genetics, mathematics, physics, nanoscience, biomedical engineering, and mechanical engineering.

Scholarships will be awarded to qualified/worthy students – particularly those who need financial help in order to attend college.

All eligible applicants will be considered without regard to race, age, color, religion, sex, or national origin.

## **Application Process:**

Scholarship information and applications shall be available from the Alleghany High School Guidance Office. The application shall consist of the following:

- (1) “**LOCAL SCHOLARSHIP APPLICATION FORM**”
- (2) **A one-page autobiographical sketch** telling about yourself; your plans for the future, and why this scholarship is important to you.

The Scholarship award(s) will be announced at the annual Alleghany High School Scholarship Awards Assembly.

**Selection Process:**

Applications will be reviewed by a Selection Committee of three persons consisting of: Alleghany High School Guidance Counselor, AHS Math teacher, and AHS Science teacher. This committee of three will recommend scholarship recipients to the donor and must be approved by the Alleghany County Educational Foundation, Inc. Board of Directors.

**Payment of Scholarship Funds:**

Payment of scholarship funds will be made by the Alleghany County Educational Foundation, Inc. directly to the college or university where the recipient is enrolled.