

2020 Jodi Davig Memorial Scholarship

Guidelines

VARC Foundation, one of the charitable arms of VARC Inc., announces the 2020 **Jodi Davig Memorial Scholarship**. One (1) \$2,500 scholarship will be awarded to a senior attending a high school in Viroqua, WI.

Available Scholarship:

One (1) \$2,500 memorial scholarship from the VARC Foundation in Honor of Jodi Davig, a longtime friend, advocate and board member of VARC Inc. Scholarship funds to be used for college tuition & fees.

Program Guidelines & Priorities:

- * Seeking a graduating senior from a high school in Viroqua, WI.
- * Applicants must have a minimum GPA of 3.0 or equivalent, and plan to attend a 2 or 4 year college or technical school, and study human services, psychology, special education, occupational therapy, or related field.
- * Scholarship funds shall be paid **for the second semester of the student's first year directly to the college** after the completion of one successful semester. Funds will not be paid directly to the student. It will be the student's responsibility to submit to the Foundation at that time an invoice for second semester tuition and fees, as well as proof of passing grades.

The applications will be reviewed and recipients selected by a committee consisting of volunteers from the VARC Foundation Board. The scholarship will be awarded in May 2020. The deadline for application submission is 4 pm, Friday, April 3, 2020.

Electronic application requests and/or questions on the application process may be emailed to foundation@varcinc.com.

SCHOLARSHIP APPLICATION 2020

Please type your answers.	
1.	Last Name: _____ First Name: _____
2.	Mailing Address Street: _____ City: _____ State: _____ Zip: _____
3.	Daytime Telephone Number: () _____ Email Address: _____
4.	Date of Birth: Month Day Year
5.	Cumulative Grade Point Average (GPA): _____ (On a 4.0 scale) Attach proof of GPA. Your most recent school transcript is required.
6.	Are you the first person in your family to go to college: YES ___ NO ___
7.	Name and location of High School attending: _____

8.	(If your resume or activities sheet answers question 8, please attach and skip to Question 9.)		
	A. List any academic honors, awards and membership activities while in high school:		
	B. List your hobbies, outside interests, extracurricular activities and school related volunteer activities:		
	C. List your non-school sponsored volunteer activities in the community:		
9.	A. If you have decided what college you will attend, please list school name:		
	B. If not, list your top 3 college choices:		
10.	Is your <u>parent or legal guardian</u> an employee of VARC Inc.? Yes_____ No_____		
	If your answer is 'yes' please answer block A below. If your answer is 'no' go to item 13.)		
11.	A.	His/her full name:	
12.	Name & address of parent(s) or legal guardian(s): (Include address if different from your own listed in Question 2.)		
	Name(s) :		
	Street:		
	City:	State:	Zip:
	Home phone of parents or legal guardians:		Work phone:

13. On a separate sheet please write an essay (250-500 words)

Write a short essay detailing your motivation for entering an educational field related to individuals with employment and/or life barriers. Discuss how this scholarship will assist you in obtaining your educational goals and what contributions toward advancing the lives of individuals with disabilities/barriers you intend to make.

STATEMENT OF ACCURACY FOR STUDENTS

I hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge. I also consent that if chosen as a scholarship winner my picture may be taken and used to promote the Foundation's scholarship program. (Winner may waive photo release due to unusual or compelling circumstances.)

I hereby understand that if chosen as a scholarship winner, according to VARC Foundation Scholarship policy, I must be present at any potential awards ceremony, surprise, or reception in May 2020 to receive my scholarship award.

I hereby understand that if chosen as a scholarship winner, according to VARC Foundation Scholarship policy, it is my responsibility to remit to the Foundation the appropriate information for my scholarship to be paid directly to my educational institution.

I hereby understand I will not submit this application without all required attachments and supporting information. Incomplete applications or applications that do not meet eligibility criteria will not be considered for this scholarship.

Signature of scholarship applicant: _____ **Date:** _____

Checklist

- Application
- Essay
- Resume/Activity Sheet
- School Transcript

MAIL or DELIVER COMPLETE APPLICATION PACKAGE TO THE FOUNDATION AT:

VARC Foundation
1133 Nelson Parkway
Viroqua, WI 54665

ELECTRONIC SUBMISSIONS MAY BE MADE TO:

faoundation@varcinc.com

REMINDER:

The deadline to receive applications by the Foundation's Office is:

APRIL 3, 2020, 4:00 p.m. NO EXCEPTIONS!