



## Best of the Batch Foundation 2021-2022 Scholarship Program

***Best of the Batch Foundation Scholarship Awards Program.*** Several scholarships will be awarded to seniors attending a high school in Western Pennsylvania. The purpose of the scholarship program is to provide financial assistance to college bound students enrolled for undergraduate study at approved colleges and universities of their choice. Awards are based on financial need, academic performance, leadership potential, and community involvement. Scholarships are awarded annually provided funds are available.

***Best of the Batch Book Stipends:*** Book stipends are available to seniors in Western Pennsylvania attending a 4-year college/university, ranging from \$500 to \$2,000.

***Danyl Settles Scholarship:*** Two (2) \$2,500 scholarships are available to one male and one female attending Steel Valley High School.

***Dr. Seuss Oh the Places You'll Go:*** One (1) \$4,321.00 scholarship inspired by Dr. Seuss is available to students attending a college outside of Pennsylvania.

***Healthy U N School (by UPMC Health Plan):*** One (1) \$2,000 scholarship is available for a student who wants to help bring awareness to Health and Wellness topics such as healthy eating, childhood obesity, hygiene, stress/depression, etc.

***Luke & Tina Getsy Scholarship:*** Awarded to one (1), male or female Steel Valley High School senior attending a 4-year college or university following graduation. Awardees will receive \$2,500.00 in scholarship per academic year over four (4) years, amounting in a total of \$10,000.00 in funds.

***Mike DeRubis Scholarship:*** One (1) \$1,000 scholarship and one (1) \$500 scholarship are available to seniors attending Blairsville High School.

### CRITERIA

- Applicants must have permanent resident status in Western Pennsylvania.
- Applicants must be completing or have completed high school successfully with a **minimum GPA of 2.5** on a 4.0 scale.
- Applicants must be accepted as a full time student at a college or university for the upcoming academic semester.
- Applicants must demonstrate a **need for financial assistance.**
- Students must apply for the 2021-2022 Federal Student Aid Application (FAFSA).
- Applicants submit a completed Scholarship Application by **Friday, April 16, 2021**

Applications will be reviewed and a Scholarship Committee comprised of educators, board members, and staff will select recipients.

Best of the Batch Foundation will accept only 5 applications per high school. Applicants must have the endorsement of their Guidance Counselor on their application attesting they are a qualified fit for this scholarship program.

***\* Best of the Batch Foundation strongly suggests that each high school present this opportunity to five (5) of the strongest applicants that match this program's guidelines.\****

**\*Award recipients will be notified by mail by the end of June 2021.\***



**BEST OF THE BATCH FOUNDATION SCHOLARSHIP APPLICATION 2020-2021**

**Application Postmark Deadline: Friday, April 16, 2021**

**Indicate which scholarship/stipend you are applying for (circle two only).**

Book Stipend    Danyl Settles    Dr. Seuss    Healthy U N School    L&T    Mike DeRubis

Please type or print all information EXCEPT signatures. \*Each field MUST be completed\*

**Applicant Information**

Last Name \_\_\_\_\_ First \_\_\_\_\_ M.I. \_\_\_\_ Nickname \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

Gender (circle one): Male Female Other    Twitter/Facebook \_\_\_\_\_

Permanent Home Mailing Address:

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_

Are you the first person in your family to attend college?  Yes  No

For statistical purposes only (check all that apply):

American Indian/Alaska Native     Black/African American     Multi-Racial     White

Asian     Hispanic / Latino     Native Hawaiian/Pacific Islander

**Current School Information**

High School Attending \_\_\_\_\_ City \_\_\_\_\_ Phone \_\_\_\_\_

High school graduation date \_\_\_\_/\_\_\_\_/\_\_\_\_ Overall GPA (on a 4.0 scale) \_\_\_\_\_

Class rank \_\_\_\_\_ of \_\_\_\_\_ (# of students) ACT Score \_\_\_\_\_ SAT Score \_\_\_\_\_

(A copy of your ACT or SAT score sheet on official high school transcript is required.)

Did you play a WPIAL Varsity Sport? Yes No    If yes indicate sport(s) \_\_\_\_\_

**Family Information**

Name of first parent/guardian who assists with expenses:

Last Name \_\_\_\_\_ First \_\_\_\_\_ Attended College? Yes No

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Name of second parent/guardian who assists with expenses:

Last Name \_\_\_\_\_ First \_\_\_\_\_ Attended College? Yes No

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Did the student complete their Free Application for Federal Student Aid (FAFSA)? Yes No

List Family Gross Annual Income from your 2020 Income Tax Form 1040 \$ \_\_\_\_\_

## College / University Information

Name of postsecondary school you plan to attend. (If unknown, please list in order of preference the schools to which you have applied.) No abbreviations.

1. \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_
2. \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_
3. \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

4 yr. College or University  2 yr. Community/Junior College  Other, please explain \_\_\_\_\_

Potential course of study \_\_\_\_\_

Have you applied for other scholarships/grants: Yes No

Will you be a full time student?: Yes No

Will you live on campus?: Yes No

## Essay Question

On a separate sheet, please write an essay 250 – 500 words long answering the following questions.

*If you are applying for a general scholarship, answer questions #1 and #2.*

*If you are applying for the Healthy U N School Scholarship, answer questions #1 and #3.*

1. Make a BRIEF video or written statement of your plans as they relate to your educational and career objectives. Discuss any challenges or obstacles you have faced and overcome in life and how this will help you succeed in college and beyond. You may also share anything else you would like the committee to know about you.
2. Describe any volunteer work or community service you have completed. How has it shaped who you are today and what valuable lessons you have learned?
3. ONLY IF APPLYING FOR “Healthy U N School”  
Health and wellness topics such as healthy eating, childhood obesity, hygiene, stress/depression, etc., are becoming a larger concern in schools. If you could create a health and wellness class or program for your peers, what would you focus on? Explain from your school experience why this area is important.

## Statement of Accuracy

I hereby affirm that all the above stated information provided by me to Best of the Batch Foundation is true, correct and without forgery. 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 due to unusual or compelling circumstances.)

I acknowledge that decisions are final. I certify that I meet eligibility requirements of the program as described in the guidelines and the information provided is complete and accurate to the best of my knowledge. If requested, I will provide proof of information. Falsification of information may result in termination of any award granted. Best of the Batch Foundation has the sole responsibility for selecting recipients based on criteria as set forth in the program’s description. This application becomes the property of Best of the Batch Foundation. (It is recommended you keep a copy for your files.)

I hereby understand that if chosen as a scholarship winner, according to Best of the Batch Foundation scholarship policy, I must provide evidence of enrollment / registration at the post-secondary institution of my choice before scholarship funds can be awarded.

**Applicant’s Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

## Application Checklist

Every year, applications are rejected because they are incomplete. Do not let that happen to you! Use this checklist to make sure your application includes all required materials. *This application is complete and valid only when all of the following materials have been received:*

### **THE FOLLOWING ATTACHMENTS ARE REQUIRED EXCEPT AS NOTED TO COMPLETE THIS APPLICATION**

- |   |  |
|---|--|
| <input type="checkbox"/> Completed Application Form, signed and dated       | <input type="checkbox"/> Resume/List of Activities   |
| <input type="checkbox"/> Statement of Support by Guidance Counselor, signed | <input type="checkbox"/> Peer Recommendation (page 6)  |
| <input type="checkbox"/> Official Transcript including SAT/ACT Test Scores  | <input type="checkbox"/> Teacher Appraisal and Recommendation (page 5)                                       |
| <input type="checkbox"/> Essay Questions                                    | <input type="checkbox"/> Required Financial Information (page 2)   |
|   | <input type="checkbox"/> FAFSA filed or will file ( <a href="http://www.fafsa.ed.gov">www.fafsa.ed.gov</a> ) |

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### **STATEMENT OF SUPPORT BY GUIDANCE COUNSELOR**

I hereby affirm that this application meets the criteria set forth by this scholarship program and that I support this application to Best of the Batch Foundation.

Name of Guidance Counselor (print): \_\_\_\_\_

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

Contact information (email and phone): \_\_\_\_\_

**Signature of Guidance Counselor:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**MAIL COMPLETE APPLICATION PACKAGE TO THE FOUNDATION AT:**

**Best of the Batch Foundation  
Attn: College Scholarship Committee  
2000 West Street  
Munhall, PA 15120**

**REMINDER:**

**The deadline for this application to be postmarked/received by the Foundation is:  
Friday, April 16, 2021 at 5:00 p.m.**

**Student's Last Name:** \_\_\_\_\_ **Student's First Name:** \_\_\_\_\_

**Teacher Appraisal and Recommendation – APPRAISAL FORM**

**Teacher Information**

We are grateful for your assistance on behalf of this applicant. We are interested in what you think is important about the applicant's academic and personal qualifications. Your recommendation will remain confidential. Best of the Batch Foundation does not provide access to application material to the candidate or to his/her family.

**\*Please submit appraisal and recommendation in signed, sealed envelope and return to the applicant.\***

Teacher's name: \_\_\_\_\_ Position/Department: \_\_\_\_\_

School name: \_\_\_\_\_ Email: \_\_\_\_\_

**Background Information**

List the course(s) you have taught this student, and the level of course difficulty (A.P., accelerated, honors, regular, elective, etc.):

\_\_\_\_\_

How long have you known the applicant, and in what context? \_\_\_\_\_

What are the first words that come to your mind to describe the applicant? \_\_\_\_\_

**Appraisal**

**RATINGS:** Compared to other college-bound students in the same class, how do you rate this student?

	<b>Below Average</b>	<b>Average</b>	<b>Good</b>	<b>Excellent</b>	<b>Outstanding (Top 10%)</b>	<b>No Basis for Judgment</b>
Creative, Original Thought						
Motivation						
Maturity						
Independence, Initiative						
Intellectual Ability						
Academic Achievement						
Written Expression of Ideas						
Participation in activities						
Adjustment to new situations						
Effective Class Discussion						
Disciplined						
Work/Study Habits						
Potential for Growth						

**Recommendation**

**Please write an assessment of the candidate's intellectual promise and personal characteristics.**

We are particularly interested in the candidate's potential to be successful and any unique accomplishments or life experiences that will help us differentiate this student from others. If needed, please attach an additional sheet with your comments.

**Peer Appraisal and Recommendation – APPRAISAL FORM**

**Peer Information**

We are grateful for your assistance on behalf of this applicant. We are interested in what you think is important about the applicant’s academic and personal qualifications. Your recommendation will remain confidential. Best of the Batch Foundation does not provide access to application material to the candidate or to his/her family.

**\*Please submit appraisal and recommendation in signed, sealed envelope and return to the applicant.\***

Peer’s name: \_\_\_\_\_

School name: \_\_\_\_\_ Email: \_\_\_\_\_

**Background Information**

How long have you known the applicant, and in what capacity? \_\_\_\_\_ Years \_\_\_\_\_ Months

What are the first words that come to your mind to describe the applicant? \_\_\_\_\_

What are the applicant’s significant talents or special abilities? \_\_\_\_\_

What is one strength and one weakness of the applicant? \_\_\_\_\_

**Appraisal**

**RATINGS:** Compared to other college-bound students in the same class, how do you rate this student?

	<b>Below Average</b>	<b>Average</b>	<b>Good</b>	<b>Excellent</b>	<b>Outstanding (Top 10%)</b>	<b>No Basis for Judgment</b>
Creative, Original Thought						
Motivation						
Maturity						
Independence, Initiative						
Intellectual Ability						
Academic Achievement						
Written Expression of Ideas						
Participation in activities						
Adjustment to new situations						
Effective Class Discussion						
Disciplined						
Work/Study Habits						
Potential for Growth						

**Recommendation**

**Please describe a time when the applicant changed your thinking or actions.**

In addition, at this time you may add any further comments you wish about the applicant. If you can compare the applicant with others who have attended school or who are applying for scholarships, we would welcome such a comparison.