



### **Scholarship and Grant Criteria and Instructions**

**In awarding the scholarship(s) and Grant(s), the following will be evaluated by the Grow Westmoreland Scholarship Committee:**

- 1. Priority consideration will be given to students who plan to live and work in Westmoreland County.**
- 2. Financial need and/or other special job-related needs.**
- 3. Achievements and activities including community service.**
- 4. Students must have plans for continuing education or entering the workforce.**

**Please find the scholarship application attached. The application deadline is March 15<sup>th</sup>, 2024. Completed applications can be mailed to:**

**Grow Westmoreland  
241 Tollgate Hill Road  
Greensburg, PA 15601**

**Or emailed to:**

**[info@growwestmoreland.org](mailto:info@growwestmoreland.org)**

**Grow Westmoreland is a 501c-3 nonprofit entity.**

**Grow Westmoreland Scholarship Application**  
*Applicants are encouraged to provide as much detail as possible.*  
*You may attach additional sheets as necessary.*

Name of Applicant: \_\_\_\_\_

Address:

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Phone Number: \_\_\_\_\_

(If awarded a scholarship you will be contacted via this phone number)

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

Date of Birth: \_\_\_\_\_

High School or Vocational School: \_\_\_\_\_

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

Employer Address:

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## Grow Westmoreland Scholarship Application

*Applicants are encouraged to provide as much detail as possible.*

*You may attach additional sheets as necessary.*

1. Share your plans to continue in higher education (2 year or 4 year), a vocational school or enter the workforce.

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2. List any achievements you have received and include activities such as clubs, hobbies or special interests.

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3. Do you plan to live and work in Westmoreland County? If so, why is that important to you?

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4. List community service, employment experiences or family/household responsibilities.

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5.

I reside with: \_\_\_\_\_ Parent (s) \_\_\_\_\_ Guardian \_\_\_\_\_ Other \_\_\_\_\_

Explanation of relationship of 'Other' \_\_\_\_\_

Father's occupation: \_\_\_\_\_

Mother's occupation: \_\_\_\_\_

Parents' current marital status: \_\_\_ single \_\_\_ separated \_\_\_ married \_\_\_ widowed \_\_\_ divorced

Total number of household members this school year \_\_\_\_\_

Of the number in the above question, how many children (including yourself) will attend college, vocational school or enter the workforce next year? \_\_\_\_\_

6. Share any other information regarding financial need and/or unique job related needs which would warrant special financial consideration

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7. Do you have any special tool or equipment needs required for your training or career?

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Certification and Authorization - We declare that the information on this application is true and correct to the best of our knowledge and belief, and authorize its use by the Selection Committee for award purposes only.

Student Signature \_\_\_\_\_

Parent or Guardian Signature \_\_\_\_\_ Dated: \_\_\_\_\_