

APPLICATION FOR WRIGHT'S HOUSE OF HOPE (WHOH) DR. WALTER MCALHANEY SCHOLARSHIP

Wright's
House of
Hope



Deadline for application is **July 1, 2024**

Mail application and essay to: WHOH Scholarship Team, PO BOX 17765
Greenville SC 29606

Our commitment to you:

The mission of this scholarship is to financially assist a qualified, highly motivated student with \$3000 tuition money (\$1500 per semester), to be paid to the winner's school choice, toward a degree in higher learning (including trade schools and technical colleges such as Greenville Technical College). The student must maintain a B average for the first semester to be granted the \$1500 for the second semester. If you are awarded a scholarship one year and maintain a B average, you may be eligible to receive a scholarship for the next school year.

This scholarship is given in memory of Dr. Walter W. McAlhaney, the beloved husband of Wright's House of Hope's (WHOH) first Board Chair, Kathleen McAlhaney. Dr. McAlhaney was a retired research biochemist and believed that learning was something that never stopped in one's life. He believed that education is a major key in one's pursuit of liberty, lifework and personal fulfillment. He also believed that our intelligence and intellectual achievements are gifts from God. He would tell you to never be ashamed of your intelligence and never be afraid to put it into action.

Your agreement to us:

If awarded this money, I will:

1. Earnestly seek to grow intellectually and maintain at least a B average in my studies (I will provide a transcript to WHOH at the end of my semester)
2. Strive to uphold the regulations and standards of the institution I am attending
3. Strive to make a positive contribution to the community in which I live
4. At the end of each school year in May, I will provide a copy of my final transcript and W9 document to WHOH by no later than 5/31.

I certify that the information submitted in this application is complete and true to the best of my knowledge.

Signature _____ Date _____

Tell us about yourself

Name (Last, First, Middle):
Preferred Name:
Birthdate:
Gender:
Address:
Email Address:
Phone Number:
What School do you wish to attend?
What term & year are you applying for?
Will you be enrolled full time or part time?
What degree or area of study are you wanting to pursue?
What is your estimated date of graduation?
Are you transferring from another college? If yes, from what school (name of institution, city/state & dates of attendance):

Personal Essay:

Please include with your application a **handwritten** 200-300 word essay that addresses one of the following topics:

1. What are your educational goals?
2. What is your greatest motivation in life?
3. What in your personal past made a difference in your decision to pursue higher education?
4. What is your greatest accomplishment in life?

Recommendation Form

Scholarship Applicant's Name _____
Last First Middle

For Respondent Use Only: (Please return to the address below.)

Please evaluate the applicant by placing a check after each characteristic to be evaluated in the column that most nearly represents your opinion. If you lack knowledge to make a rating, give your estimate of the applicant's ability and/or check the column "inadequate opportunity to observe."

	Average	Above Average	Superior - Top 10%	Inadequate opportunity to observe
Ability to master academic work				
Ability in oral expression				
Ability to write				
Motivation				
Level of maturity				
Self-reliance and independence				
Ability to work with others				
Creative and innovative talent				

How long have you known the applicant?

What is your relationship to the applicant?

In the space below or by attachment, please add any additional comments in the support of this applicant.

Please print name

Signature

Phone & email

Deadline for recommendation is July 1, 2024

Please mail this form to: WHOH Scholarship Team, PO BOX 17765 GREENVILLE SC 29606

For questions, please email Beverly Caligaris, WHOH Executive Director, at beverly.caligaris@whoh.org