

MEL WALKER MEMORIAL SCHOLARSHIP HISTORY AND INSTRUCTIONS

Mel Walker was a lifelong resident of Madison, Ohio. He worked at Madison Golf and Country Club for over 45 years. In high school he was involved in varsity sports as were his two sons, Clint and Craig.

Upon his sudden death in the summer of 2019, his co-workers, friends and family decided to have a memorial scholarship fundraising golf outing at the Club. The first one was then held in the fall of 2019. A committee was set up for the purpose of managing the funds raised and awarding scholarships to high school seniors that had earned a varsity letter.

Three \$1,000 scholarships will be awarded on a yearly basis, one to a single senior attending each of the following schools, Madison High School, Perry High School and Geneva High school. Candidates must plan to further their education at a college, university, technical or trade school following their graduation.

To be considered to receive one of the scholarships, senior students will fill out one of the attached applications. Applications will be distributed to the high school guidance counselors by March 1st. Completed applications must be returned by April 1st. Interviews of the finalists at each school will be held by the committee in April. The scholarships will then be announced and awarded at the school's Academic Awards Assembly.

Candidates must have earned at least one varsity letter in a school sanctioned sport and maintained a 3.0 grade point average. Other school and community activities may also be considered in choosing award winners. Use extra sheets of paper if the space for responses is too small.

Thank you and good luck.

MEL WALKER MEMORIAL SCHOLARSHIP AWARD APPLICATION

APPLICANT'S NAME _____

ADDRESS _____

PHONE NUMBER _____ CELL NUMBER _____

DATE OF BIRTH _____ EMAIL _____

GPA _____ HIGH SCHOOL ATTENDED _____

SPORT OR SPORTS WHERE VARSITY LETTER(S) WAS/WERE EARNED _____

SCHOOL I PLAN ON ATTENDING IN THE NEXT YEAR _____

OTHER ACTIVITIES AT YOUR SCHOOL OR COMMUNITY _____

PARENT(S) _____

ADDRESS _____

EMAIL _____

PHONE NUMBER _____ CELL NUMBER _____

APPLICANT'S SIGNATURE _____ DATE _____

SIGNATURE OF PARENT/GUARDIAN _____ DATE _____

SIGNATURE OF A SCHOOL ADMINISTRATOR OR GUIDANCE
COUNSELOR _____ DATE _____