# 33<sup>rd</sup> ANNUAL FRANKLIN B. WALTER ALL-SCHOLASTIC AWARD

#### **OVERVIEW**

#### PROGRAM:

The Franklin B. Walter All-Scholastic Award Program was established by the Ohio Educational Service Center Association (OESCA) to promote and recognize outstanding academic achievement. One senior from each county in Ohio will receive this annual honor.

#### **ELIGIBILITY:**

Applicant must be a **high school senior** enrolled in a public school district – local, city, or JVSD- within the ESC's service region. <u>ONLY ONE APPLICATION PER DISTRICT WILL BE ACCEPTED.</u> Recipients should demonstrate outstanding academic achievement as indicated by high school grades, test scores, school activities, and awards.

#### AWARD:

One student from each ESC will be invited, along with his or her guests, to attend a special recognition luncheon at the Hilton Columbus at Easton, 3900 Chagrin Drive, Columbus, OH 43219 at 11:30 a.m. (or via Zoom, depending on public health order at that time). (A student's guests are limited to a total of five (5) individuals and include himself/herself, parent(s), school officials, and ESC superintendent.) Associated fees for the student, his or her parent(s), and one administrator will be paid for by the Ashtabula County Educational Service Center. Registration materials for the awards brunch will be sent by OESCA.

#### TIMELINE:

January/February

nomination packets are mailed to all Ohio Educational Service Center superintendents who distribute the packets to area

high schools

February 25, 2022

Applications due to student's guidance counselor

March 14, 2022

Completed applications (1 per district) are due back to:

Mr. Michael Candela, Superintendent

ATTN: FBW Scholarship

Ashtabula County Educational Service Center

2630 West 13th Street, Suite A

Ashtabula, OH 44004

May 3, 2022

Awards presentation at Hilton Columbus at Easton 3900 Chagrin Drive Columbus, OH 43219

(11:30 a.m. luncheon) or via Zoom

MC/peg 1/28/2022

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#### APPLICATION FORM

(to be competed by the student)

## PLEASE TYPE OR PRINT CLEARLY: (please supply all information to the best of your ability) Applicant's Name: \_\_\_\_\_ Phone:( )\_\_\_\_ Applicant's Email address: Parent(s) Name: \_\_\_\_\_ Phone: ( ) COMPLETE Home Address: \_\_\_\_\_ (street, city, state, zip) School District: District Superintendent: Superintendent Address: \_\_\_\_\_ High School: \_\_\_\_\_\_ High School Address: High School Principal: Guidance Counselor: \_\_\_\_\_ Email: \_\_\_\_ Guidance Counselor Phone: City School Local School JVSD (A-Tech) County: \_\_\_\_\_Ashtabula\_\_\_ County Educational Service Center: Ashtabula County ESC Future Plans: College/University Attending: Major: PLEASE ANSWER THE FOLLOWING ON A SEPARATE SHEET: Activities: List extracurricular or community activities including class offices held, student government activities, athletics, music and/or theater, and church activities. List the specific year for each item. List all awards/honors received, giving specific years and reasons for each item. Awards: Goals: In 500 words or less, write an essay/personal statement discussing your shortterm and long-term goals, academically, professionally, and/or personally. \_\_\_\_\_ Date: \_\_\_\_\_ Signature of Applicant

Return completed applications no later than February 25, 2022 to:

Your school guidance counselor

~ ~ ~ Incomplete applications will be rejected ~ ~ ~

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#### CREDENTIAL DOCUMENT

(to be completed by the guidance counselor)

PLEASE TYPE OR PRINT: (please complete <u>all</u> information)		
Applicant's Name:	Phone: <u>()</u>	
Applicant's Email:		
PLEASE ASSIST THE APPLICANT BY FOLL	LOWING THE DIRECTIONS BELOW	۷:
Attach a transcript of grades for the first seven	n semesters of high school.	
List the number of days of school missed this y	year	
List the number of days of school missed in the	e past two years	
List the applicant's results of scholastic aptitude scores:	le as indicated by standardized test	
Test:	Score:	
Test:	Score:	
Applicant's Grade Point Average:	Class Rank:	
Signature of Counselor	Date:	

NOTE: This year students must submit at least one, but not more than two letters of recommendation with their packet. A form is included.

#### ATTENTION COUNSELOR / PRINCIPAL:

Please assist your candidate to return this form with <u>completed</u> application <u>no later than March 14, 2022</u> to:

Mr. Michael Candela, Superintendent ATTN: FBW Scholarship Ashtabula County Educational Service Center 2630 West 13<sup>th</sup> Street, Suite A Ashtabula, OH 44004

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### Letter of Recommendation Form

STUDENT NAME:
STUDENT SCHOOL:
NAME OF PERSON MAKING RECOMMENDATION:
Signature:
MC/peg 1/28/2022