



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY



# TUSCARAWAS COUNTY YMCA

## *2021 Thomas J. Patton* *YMCA Scholarship*

The Thomas J. Patton/YMCA Scholarship was established in 1989 by Robert (Fizz) Miller to honor Tom Patton for his 40 plus years of service to the people of Tuscarawas County through his work with the Tuscarawas County YMCA. The scholarship has been given each year since 1990 with 127 awards being given to 81 individuals. The scholarship is awarded each year to area students who have been active at the Tuscarawas County YMCA through leadership activities and program participation. Special consideration is given to those individuals who have provided volunteer leadership.

Traditionally, scholarships are awarded each year totaling approximately \$10,000. Selection is based on the following credentials:

1. Y volunteer leadership
2. Y staff leadership
3. Financial need
4. Participation in church, school, and community
5. Academic ability for next level of education
6. Work ethic to achieve goals

All scholarship finalists will meet with the Scholarship Committee for a personal interview, usually in April or May.

The deadline to submit completed applications to the Y is March 26, 2021. For more information, or if you have any questions regarding the scholarship, please contact the Y at 330-364-5511.

**TUSCARAWAS COUNTY YMCA**  
**2021 - THOMAS J. PATTON/YMCA SCHOLARSHIP APPLICATION**

**Student Information:**

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_

**Family Information:**

Father's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Address (if different from student): \_\_\_\_\_

Employed by: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Address (if different from student): \_\_\_\_\_

Employed by: \_\_\_\_\_

Do you live with your: Mother & Father \_\_\_\_ Mother \_\_\_\_ Father \_\_\_\_ Other \_\_\_\_

**Brothers and Sisters**

	<u>Name</u>	<u>Age</u>	<u>School currently attending</u>
1)	_____	_____	_____
2)	_____	_____	_____
3)	_____	_____	_____

**School Information:**

High School: \_\_\_\_\_ Date of Graduation: \_\_\_\_\_

Class Standing: \_\_\_\_\_ # in Class: \_\_\_\_\_ GPA: \_\_\_\_\_

School Activities & Recognitions: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Education Plans:**

Please indicate the schools to which you have applied.

University	Accepted	Major	Approximate cost/year

**Financial Information:**

Because need is an important component in awarding this scholarship, we feel compelled to ask your parents' adjusted gross income. This information will be held in the strictest confidence.

Parents adjusted gross income for last year (joint) = \$ \_\_\_\_\_

(Line #37 on the 1040 tax form)

Do you anticipate a substantial change next year? No \_\_\_ Yes \_\_\_ How much? \_\_\_\_\_

If parents are separated, please list adjusted gross income separately

Father: \$ \_\_\_\_\_ Mother: \$ \_\_\_\_\_

Name of the University you plan to attend: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

First Year Costs:	Tuition	\$ _____
	Room & Board (If Applicable)	\$ _____
	Books	\$ _____
	Other expenses (Please Itemize)	\$ _____
	_____	_____
	_____	_____
	<b>TOTAL COST</b>	\$ _____

Please list sources of income you plan to access for your first year of school:

College Scholarships	_____	\$ _____
Other Scholarships	_____	\$ _____
Grants:	_____	\$ _____
Loans:	_____	\$ _____
Work Study:	_____	\$ _____

**TOTAL AWARDS:** \$ \_\_\_\_\_

Family Contribution	_____	\$ _____
Personal Contribution	_____	\$ _____

**TOTAL FUNDS AVAILABLE:** \$ \_\_\_\_\_

**Y Involvement:**

Are you a Y member? Yes \_\_\_ No \_\_\_ If yes, how many years? \_\_\_\_\_

Have you been a Y volunteer? Yes \_\_\_ No \_\_\_ If yes, please indicate volunteer work performed: \_\_\_\_\_

Have you been a Y staff member? Yes \_\_\_ No \_\_\_ If yes, please indicate work performed: \_\_\_\_\_

**Church Involvement:**

Church you attend: \_\_\_\_\_ Minister's Name: \_\_\_\_\_

Activities with your church: \_\_\_\_\_

**Work Experience:**

Place of employment	Dates worked	Duties

What are your plans for this summer: \_\_\_\_\_

**Community Involvement:**

Please indicate your community involvement: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**References:**

Name	Address	Phone	Relationship

**Only for applicants already attending college:**

Name of University: \_\_\_\_\_ Year: \_\_\_\_\_

Major: \_\_\_\_\_ Minor: \_\_\_\_\_ GPA: \_\_\_\_\_

College and community activities: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Signature of parent

\_\_\_\_\_  
Date

**Please return application by March 26, 2021 to:**

Tiffany Foxx, CEO  
Tuscarawas County YMCA  
600 Monroe Street  
Dover, OH 44622  
tiffany@tuscymca.org