

# John “Ralphie” McDaid Memorial Scholarship

---

## ELIGIBILITY/CRITERIA

This scholarship is dedicated to the memory of John “Ralphie” McDaid, a former Lincoln student and Adrian High School alum, who passed away on November 2, 2011. John was a friend to all, and always willing and eager to serve, and to help others. This scholarship is open to any and all APS seniors.

## APPLICATION PROCEDURES

Submit Adrian High School Scholarship Application  
(including all attachments listed on the application)

**\*\*All applications MUST BE HAND-WRITTEN**

**\*\*ESSAY MUST BE HAND-WRITTEN**



# Adrian High School Scholarship Application

Common application for ALL Adrian High School Scholarships

NAME OF SCHOLARSHIP: \_\_\_\_\_

Be sure to submit all necessary documentation listed below. Incomplete applications will not be considered. Submit a SEPARATE common application and documentation for EACH SCHOLARSHIP. **DO NOT STAPLE!**

Applicant's Name: \_\_\_\_\_

Parent Names \_\_\_\_\_

Parent Employer(s) \_\_\_\_\_

Number & Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Home phone number \_\_\_\_\_ Student cell phone \_\_\_\_\_

Planned course of study \_\_\_\_\_

Are there additional sources of financial support anticipated to fund your college education? YES NO

**Attach to this application a copy of the following in the order listed:**

- Current High School Grade Transcript
- College Acceptance Letter
- Activities resume (including awards, volunteer, work and school activities, and community service)
- 2 Letters of recommendation from faculty, administration or a responsible community person (not related to the applicant), unless a different request is stated for a specific scholarship. **Review each scholarship for "specific requirements"**.
- A hand-written essay constructing your thoughts based on Ralphie's life philosophy "We do not deserve anything in life, we earn it." **Review each scholarship for "specific requirements"**.

**Return Completed Application and Additional Material (if required)**

**to the Counseling Center by Friday, April 12, 2024 at 3pm**

**I authorize the release of my high school grades, test scores, and other pertinent information in my high school file to the Selection Committee.**

*I understand that this scholarship, if granted to me, is for pursuing the course of study at the college/university stated in the application. If for any reason my plans change before beginning my freshman year, I will inform the Scholarship Committee/AHS Business Office by letter. At that time the Scholarship Committee/AHS Business Office will have the right to reevaluate my application and revoke my scholarship.*

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent: \_\_\_\_\_ Date: \_\_\_\_\_

A separate packet is needed for each scholarship.