

MORTON COMMUNITY FOUNDATION
LOCAL SCHOLARSHIP OPPORTUNITIES

Dear APPLICANTS:

The Morton Community Foundation Board of Trustees is pleased to announce the awarding of educational scholarships. All our scholarships are permanently endowed scholarships... that is, for each scholarship, a sum of money has been deposited at the Foundation... that amount has been invested... and a portion of the annual interest from those funds is used to provide the scholarships year after year. Many scholarships have a story behind them, and often, that story involves the death of a loved one. The families of these individuals have established scholarships as a way to honor the memory of their loved one.

To streamline the amount of time you need to spend completing each of these scholarships, we have created a common portion of the application (Part I) that will be used by each of the different scholarship committees. In addition, you will have to complete a separate essay (appendix) for each scholarship for which you wish to apply. **For your application to be complete, you must attach the appropriate appendix item(s) for each scholarship for which you are applying.** Please carefully read the descriptions of each of the local scholarships, and complete the information requested on the appendix page, sign it, and return it with the rest of the completed application packet.

THE SCHOLARSHIP APPLICATION DEADLINE IS LISTED IN THE APPENDIX FOR EACH
SCHOLARSHIP. ALL APPLICATIONS MUST BE RETURNED TO:

Morton Community Foundation, 135 S First Ave, Morton IL 61550 • 309.291.0434

GOOD LUCK!

SCHOLARSHIP APPLICATIONS MUST BE RETURNED TO THE MORTON COMMUNITY FOUNDATION OFFICE BY DATE LISTED IN APPENDIX FOR EACH SCHOLARSHIP.

PART I

For Office Use Only: Applicant # _____

APPLICANT INFORMATION SHEET

NAME: _____ **ID# (MHS Only):** _____

ADDRESS: _____

PHONE: _____ **EMAIL ADDRESS:** _____

I AM APPLYING FOR THE FOLLOWING SCHOLARSHIP(S) (please be sure to attach the appropriate appendix):

_____ APPENDIX A: Morton Lacrosse Club Scholarship

_____ APPENDIX B: Ilse Droll Memorial Women’s Medical Career Scholarship

My signature verifies that all the information in the packet is accurate and authorizes my High School Counseling office to release an official copy of my transcript to necessary scholarship committees:

Student Signature **Date**

Parent Signature **Date**

MORTON COMMUNITY FOUNDATION SCHOLARSHIPS

For each scholarship you apply for, you must complete the appropriate appendix section below the scholarship description.

Part 2, PLEASE FOLLOW THIS PROCEDURE:

- 1. Please answer each appendix question on a separate sheet of paper.**
- 2. Type the appendix letter and the name of the scholarship on the top of your page.**
- 3. Responses should be no more than 1 page, double spaced, and using Times New Roman.**
- 4. Do not staple papers!**
- 5. PLEASE DO NOT WRITE YOUR NAME ANYWHERE ON YOUR ESSAY!**

APPENDIX A: MORTON LACROSSE CLUB SCHOLARSHIP

Selection of the recipient of the scholarship(s) is based on the following criteria:

- Must have participated as a player on an MLC high school age lacrosse team for at least two (2) years.
- Must be a MLC graduating senior who has demonstrated academic success by having achieved a cumulative GPA of at least 3.0. Applicant should submit a copy of their High School transcript.
- Must be enrolled in an accredited, degree-granting college or university (minimum of 12 credit hours) for the following academic year to play Lacrosse. Scholarship check will be made out directly to the college/university for deposit in the student's account upon receipt by the Morton Community Foundation of a letter from that college's Lacrosse coach, confirming the student's participation as a player on the team.
- Agrees to become a volunteer coach, official, or board member in a community youth lacrosse program for two years when his/her life circumstances permit.
- Has demonstrated the following attributes : Positive attitude, Excellent teamwork, Encourages others, Charitable, Compassionate, Role model to underclassmen, Adheres to MLC and CILax Conference Code of Conduct Rules, Leadership, Accomplishments and Awards on and off the field.
- **Must include an essay of 500 words or less addressing the following topics:**
 - **What I have learned through participation in the Morton Lacrosse Club program?**
 - **How I will be able to apply what I've learned in the future?**
 - **How I intend to be involved in a community youth lacrosse program.**
- **Please include any relevant information regarding your financial need.**
- Applications for the Scholarship(s) will be accepted annually January thru March. The committee will determine the winner(s) in April, and the scholarships will be publicly announced in May.

**LACROSSE CLUB SCHOLARSHIP APPLICATIONS ARE DUE BY:
March 17, 2023**

APPENDIX B: ILSE DROLL MEMORIAL WOMEN'S MEDICAL CAREER SCHOLARSHIP

Selection of the recipient of the scholarship(s) is based on the following criteria:

- Must be a female resident of Morton or Morton Township who is or will be attending an accredited 2-year or 4-year college or a university to pursue a career in some sort of Medical Field (Including, but

not limited to: Doctor, Nurse, Nurse Practitioner, Pharmacist, Dentist, Dental Hygienist, Veterinarian, etc.).

- Must include an essay of 500 words or less addressing the following:
 - Why I want to pursue a career in the chosen Medical Field
 - Following are the reasons why this career is important to me.
- Please include any relevant information regarding your financial need.

**ILSE DROLL SCHOLARSHIP APPLICATION IS DUE BY:
March 17, 2023**
