

Ohio Oil and Gas Energy Education Foundation

2019 SCHOLARSHIP APPLICATION GUIDELINES



OHIO OIL & GAS ENERGY EDUCATION PROGRAM



SCHOLARSHIP INFORMATION

- Applications are accepted between **January 1, 2019** and **March 1, 2019**.
- Scholarship winners will be announced in April 2019.
- **\$1,000** annual scholarship may be renewed up to four years.
 - If qualified, renewal application must be completed.
- Scholarships are limited to undergraduate studies.

MINIMUM APPLICANT CRITERIA

- Must be a U.S. citizen.
- Must have a career goal in the crude oil and natural gas industry.
- Must be an OHIO resident OR a student attending, or planning to attend an accredited OHIO college, university, technical, or trade school.
- Must have and maintain a grade point average (G.P.A.) of 2.5 or higher.

SUBMISSION REQUIREMENTS

- Completion of two-page application, signed and dated.
- Two letters of recommendation from a teacher, employer or other mentor figure.
 - Note: Recommendations from family members are not acceptable.
- An essay consisting of no less than 250 words, and no more than 500 words, describing personal and career goals, academic achievements, extracurricular activities, awards/recognitions, community service, work history, financial needs, and personal or family influences. You should also describe how you would use your degree to help the oil and gas industry.
- Transcripts, if applicable.
- ACT and/or SAT test scores, if applicable.

RETURN COMPLETED TWO-PAGE APPLICATION WITH ATTACHMENTS NO LATER THAN MARCH 1, 2019.

Information received after this date will render the application incomplete and it will not be processed.

RETURN APPLICATION TO:

Ohio Oil and Gas Energy Education Foundation

Attn: Scholarship Awards

P.O. Box 187, Granville, Ohio 43023

Phone: (740) 587-0410 | www.oogeep.org | cwatkins@oogeep.org

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PLEASE NEATLY PRINT OR TYPE INFORMATION - IF ADDITIONAL SPACE IS NEEDED, ATTACH SUPPLEMENTARY PAGES

PERSONAL INFORMATION

Full Name: _____

Date of Birth (MM/DD/YYYY): _____ Male Female

Are you an Ohio resident when not living at school? Yes No

Primary Mailing Address: Home School Parent/Guardians House

Street Address: _____ Apt #: _____

City: _____ State: _____ Zip Code: _____

Secondary Mailing Address (if needed): Home School Parent/Guardians House

Street Address: _____ Apt #: _____

City: _____ State: _____ Zip Code: _____

Primary Phone: _____ Secondary Phone: _____

Email: _____

Are you currently a student? Yes, full-time Yes, part-time No

Are you currently working? Yes, full-time Yes, part-time No

Are you currently enrolled in the military or a veteran? Yes No

Have you previously applied for an OOGEEF scholarship? Yes No If yes, what year(s)? _____

How are you funding your education? (Check all that apply):

- Personal Income
- Scholarships
- Financial Aid / Grants
- Student Loans
- Parent/Guardian Income
- Other

FAMILY INFORMATION

Father's Employer/Occupation: _____ Deceased

Mother's Employer/Occupation: _____ Deceased

Do you have any other siblings currently attending college? Yes No If so, where? _____

Do you, or a family member, currently work in the Ohio oil and gas industry? Yes No

If yes, please list relationship(s), company name(s), and job title(s):

Name	Relationship	Employer	Job Title
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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PLEASE NEATLY PRINT OR TYPE INFORMATION - IF ADDITIONAL SPACE IS NEEDED, ATTACH SUPPLEMENTARY PAGES

EDUCATIONAL INFORMATION

Select the amount of higher education you plan on completing:

4-Year Program / Bachelor Degree

2-Year Program / Associate Degree

1-Year or Certificate Program

Other: _____

Career Goal: _____

Major or Field of Study: _____

College, University, Technical or Trade School: _____

City: _____ State: _____

Anticipated Date of Graduation (MM/YYYY): _____

Are you currently attending the college, university, technical or trade school listed above? Yes No

If no, have you been accepted? Yes No

Current GPA: _____ If not available, why? _____

Transcript Attached? Yes No If not, why? _____

CURRENT HIGH SCHOOL STUDENTS ONLY

High School Name: _____

City: _____ State: _____

Date of High School Graduation (MM/YYYY): _____

ACT Score (if applicable): _____ SAT Score (if applicable): _____

SIGNATURE OF APPLICANT

I certify that all information is true and accurate. I authorize independent verification.
I understand that if I am awarded an OOGEEF Scholarship, information contained in this
application may be released to the media.

Signature of Applicant: _____ Date: _____