



Ben & Alyce Shaver Scholarship Donated by the Ben Shaver Family Trust

Ben Shaver graduated from Moxahala High School in 1942. He served in the U.S. Army Medical Corps during World War II. He received his B. A. Degree from Muskingum College in 1950 and a M. Ed. Degree from Ohio University in 1954. For the next 30 years he was a teacher/coach and public school administrator retiring as Ashland County Superintendent in 1979. Ben was the co-founder and former president of the Ohio Association of Local School Superintendents Association (OALSS). Later he became president of the Ohio County Superintendents Association and a charter member of the Washington DC based Council of Rural Electric Cooperative Communicators. It is Ben's earnest hope that this scholarship will enable some young person to build a foundation for a productive life and that he/she will then help someone else.

ELIGIBILITY

New Applicants

- o Graduating senior of Miller High School
- 2.75 GPA or above
- Proof of need
- Accepted to an accredited two- or four-year institution
- Must complete the attached application
- Write a letter thanking Mr. Shaver for the scholarship (write it like you received the scholarship).
 - > This letter must include:
 - Your name and brief information about your family
 - Where you plan to attend college
 - Goals and how you plan to achieve them

Renewal Applicants

- Must be a past Shaver Scholarship recipient
- o Currently enrolled at an accredited two- or four-year institution
- Must complete the attached application
- o A college transcript
- Write a letter providing an update on the previous year's postsecondary educational experience.

THE APPLICATION DEADLINE IS APRIL 1, 2024. (IT MUST BE POSTMARKED BY THIS DATE), AND MAILED TO:

FOUNDATION FOR APPALACHIAN OHIO BEN AND ALYCE SHAVER SCHOLARSHIP, 35 PUBLIC SQUARE, NELSONVILLE, OHIO 45764

OR EMAILED TO SCHOLARSHIPS@FFAO.ORG

SECTION I – GENERAL INFORMATION	NEW	RENEWAL
1. APPLICANT'S NAME		GENDER
2. COLLEGE ID	_ PHONE _	
3. ADDRESS		
4. EMAIL		
5. FALL SEMESTER PAYMENT NEEDED	BY:	
6. COLLEGE FINANCIAL AID OFFICE A	Address	
SECTION II – FAMILY INFORMATION		
1. Father's Name:	Mother's Na	me:
Address:	Address:	
2. Employer:	Employer:	
3. Names of brothers and/or sisters currer NAME	ntly enrolled in colle AGE	ge: SCHOOL ATTENDING

SECTION III – ACADEMIC INFORMATION: HIGH SCI	HOOL SENIORS ONLY:
Name of High School	
1. High School GPA High School Clo	ass Rank in class of
2. ACT Scores: English Math	Reading
Writing Science/Reasoning	Composite
3. SAT Scores: Verbal Math	Writing
4. College/University you plan to attend:	
SECTION IV – APPLIES ONLY TO STUDENTS CURRENT	TLY ENROLLED IN COLLEGE:
1. Date of graduation from high school	May/June(Year)
2. College/University in which you are enrolled:	

3. College:	GPA	Major		
4. Quarter/Ser	mester you will gra	duate from college:		
SECTION V - FI	NANCIAL INFORMA	ATION – FOR ALL NEW AN	ID RENEWAL APPLICANTS.	
1. Gross Family	/ Income: (checkor	ne)		
\$0 - \$25,	.000			
\$25,000	- \$50,000			
Over \$5	0,000			
2. Number of [Dependents			
	irm that the statem d belief and is in go		s true, complete, and correc	ct to my
APPLICANT'S SI	GNATURE		DATE	
	ardian's Signatur Pplicant is a Minc		DATE	

PLEASE RECHECK YOUR APPLICATION