

Marie Newton Sepia Scholarship Application



The Marie Newton Sepia Memorial Scholarship Fund established in 1983 as a part of Pilot International to provide financial aid to a qualified graduate or doctorate student preparing for or currently working in careers related to youth development and leadership, brain safety and fitness or caring for families in times of need. M. Fred Sepia made the initial contribution to the fund in memory of his wife, Marie, who was a longtime member of Pilot International and served as International President in 1968 – 1969. It is intended that this fund will permanently further Pilot International’s mission by assisting worthy capable individuals to pursue careers in which they will teach, encourage and rehabilitate children with disabilities. The amount granted for one full academic year will not exceed \$1,000. Applicants must have received a Bachelor’s degree from an accredited college or university in any country where Pilot clubs exist. Applicants may be full or part time students, whose courses will, in the judgment of the Scholarship Division, be proper background courses for teaching and working with disabled children. Postgraduate work or research should improve the skills of the applicant in dealing with brain-related disorders / disabilities of children. Applicants must agree, in writing, to work with children with brain-related disorders / disabilities upon completion of the postgraduate training or research, to the terms and conditions of the scholarship and to follow such administrative procedure prescribed by the committee.

Applications and all materials are due and must be postmarked by March 15, 2020. The Scholarship Committee will select the award recipient and recipients will be announced by May 2020. Additional eligibility requirements are listed below. To apply, complete the attached scholarship application form and submit all required items to piffscholarships@pilothonline.org by 5 pm on March 15, 2020.

PLEASE NOTE: Scholarship funds will be disbursed after the upcoming semester grades have been submitted to headquarters.

REQUIRED ITEMS TO BE INCLUDED WITH THIS APPLICATION

1. Your resume (include extracurricular and/or community activities).
2. A recent original transcript, but not necessarily officially sealed.
3. The attached form regarding your finances. Also attach a typed paragraph explaining your financial need or how a scholarship can assist you financially.
4. Proof that you have submitted your FAFSA for the 2020-2021 year.
5. A typed short essay (1 – 2 paragraphs) describing your career goals and how a Pilot International scholarship can help you achieve these goals.
6. Two letters of recommendation (teacher/professor or employer)

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SCHOLARSHIP APPLICATION

DATE: _____

NAME: _____
LAST FIRST MIDDLE

CURRENT ADDRESS: _____
CITY STATE ZIP

PERMANENT ADDRESS: _____
CITY STATE ZIP

DATE OF BIRTH: _____ HOME PHONE: _____ WORK PHONE: _____

SINGLE MARRIED DEPENDENTS: YES NO IF YES, # OF DEPENDENTS _____

Current Status: (check one) Undergraduate Graduate Major _____

Will you be a full-time graduate (9 hrs.) or undergraduate (12 hrs.) student in the Fall 2020 term? Yes No
If no, then you are **not** eligible for this scholarship.

Although not necessary, are you being sponsored by a Pilot Club? If so, please list the name of the Pilot Club, Contact Name and Address: _____

EMPLOYMENT RECORD

<u>Dates</u>	<u>Position</u> (most recent, first)	<u>Employer</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Are you considering a career in the field of youth development, leadership, brain safety & fitness, and/or caring for families in need? Yes No

Would you like to be contacted by a Pilot Club? Yes No

IMPORTANT: PRINT OR TYPE FORM LEGIBLY AND COMPLETELY. APPLICATIONS WILL NOT BE CONSIDERED IF THEY ARE INCOMPLETE OR ILLEGIBLE

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FINANCIAL DATA

Annual Sources of Anticipated Revenue and Expenses for the 12-month period:

January 1 - December 31, 2020

REVENUE

Amount earned by applicant: \$

Amount earned by spouse (if applicable):

Amount received from parents (including value of food and lodging if living with parents):

Amount received from scholarships:

(list source)

Amount received from other sources:
(please specify) _____

Total Revenue: \$

EXPENSES

Housing:

Food:

Transportation:

Tuition, books and supplies:

Other expenses:
(please specify)

Total Expenses: \$

Does your employer offer a tuition reimbursement plan? Yes No