THE BESSIE AND GODFREY THOMPSON SCHOLARSHIP

GENERAL INFORMATION

The Bessie and Godfrey Thompson Charitable Foundation provides scholarship benefits to worthy and selected students to help them enter post secondary school education and to help them remain studying for up to four years if their scholarship remains high and their financial needs warrant. Payments are made in such amounts and at such times as the Trustee may deem advisable. The scholarships may be awarded by the foundation for four years, but a complete application must be filed each year. Only new applications from high school seniors will be accepted for the 2023-2024 academic year. Re-applicants will not be considered.

ELIGIBILITY

Worthy students who are residents of Lincoln County, Washington and will graduate and receive a diploma from a high school (regardless of the school they attend and receive their diploma) are eligible. Any student who resides outside of Lincoln County are not eligible. For example, Keller residents who will graduate from Wilbur High School are not eligible but those graduates from ACH or Christian Heritage who reside in Lincoln County are eligible. Graduates must be accepted to a college, technical school or other school of higher learning before the scholarship will be paid.

The student's past must reveal; (1) scholarship ability, (2) good character, (3) desirable appearance, (4) industry, (5) ability, (6) a promise of useful citizenship, and (7) need of financial assistance. All applicants must be in their Senior year of High School, or have graduated from high school within the past four years, and have a 3.0 or better high school or college GPA.

SELECTION PROCEDURE

Applications are reviewed by a committee consisting of the Lincoln County Superior Court Judge, a Lincoln County Commissioner and the Superintendent of Wilbur School District No. 200, Wilbur, Washington or his/her designee. The committee may use such methods and adopt such rules as they deem appropriate in the selection process. All selections are final and the successful applicants are notified by Joshua F. Grant, the scholarship fund secretary, who is not a voting member of the committee.

INSTRUCTIONS TO APPLICANT

- 1. The applicant must complete the application to the best of his/her knowledge and sign on Page 2. A parent or guardian must sign on Page 2 as a verification of family financial data. A copy of the parent's 1040 Federal Income Tax Return, pages 1 and 2, for the current year MUST be attached to the application.
 - 2. The applicant must provide a high school transcript. The transcript should be attached to the application.
- 3. The applicant <u>MUST</u> provide a copy of the SAT or ACT test scores (regardless of whether or not they are required by the college).
- 4. There will be an automatic disqualification of the application if 1) parent's income tax return or 2) transcript, and/or 3) SAT-ACT test scores are not submitted with the application.
- 5. The applicant should request his/her high school principal, superintendent, or other school instructor to complete the recommendation.
- 6. To be eligible for consideration, the applicant must forward the <u>completed original application plus two</u> copies of all attachments (3 complete sets) by April 15 of each year to:

Joshua F. Grant, Secretary
The Bessie and Godfrey Thompson Scholarship
P.O. Box 619
Wilbur, WA 99185.

7. The payment of all scholarships shall be made directly to the post-secondary school/ institution by the trustee.

THOMPSON SCHOLARSHIP APPLICATION

TO: The Education Committee of the BESSIE AND GODFREY THOMPSON CHARITABLE FOUNDATION in Lincoln County, Washington

c/o Joshua F. Grant, Secretary P O Box 619 Wilbur WA 99185-0619

Name
Name of Parent or Guardian
Mailing Address of Parent/Guardian
Physical Address
County of Student's Physical Residence
Applicant's Birthdate Phone number:
Graduate of High School; Year Class Standing
High School G.P.A(Please attach high school transcript)
SAT Scores: Critical Reading Math Writing (**copy of score sheet is required)
or ACT Score (**copy of score sheet is required)
Major Area of Study
List Student Activities in High School
State briefly any employment experience you have had
What college have you selected to attend?
What preliminary arrangements have you made?
Address of College's Bursar's or Financial Aid Office
Last 4 digits SS # College Student ID # (if known)
Do you own a car? Make Model Year Blue Book Value
Have you paid cash for equipment, car, radio, etc., during the year?
What did you buy? Amount
Are you making monthly installment payments? Amount

INFORMATION CONCERNING FAMILY INCOME AND RESOURCES

	Name	Address	Occupation	a Annual	Income
Father					
Mother					
Guardian _			to		
ATTACH	A COPY OF	PARENT'S 1040 F	EDERAL INCOME TA	X RETURN (Curr	ent Year)
Names of B	rothers ar	nd Sisters in You	r Family Age	Percent of I	
			Parent or Guardi	.an's Signature	<u> </u>
SCHOLARSHI	P. AND I	y for a bessie <i>f</i> f chosen to rece	IVE IT, I WILL C	HEERFULLY ABII	E BY ALL THE
		F, AND WILL ACC	EPT CANCELLATION	OF SAID SCHO	LARSHIP UPON
			Applicant'	s Signature	2
			Date	3	-

Please note that the scholarship committee will automatically decline an incomplete application including no tax return, no transcript, and/or no copy of SAT/ACT Score sheet. (SAT/ACT not required for Community College)

RECOMMENDATION

TO: The Education Committee of the BESSIE AND GODFREY THOMPSON CHARITABLE FOUNDATION in Lincoln County, Washington

c/o Joshua F. Grant, Secretary P O Box 619 Wilbur WA 99185

		y recommend th Scholarship:	e follo	wing	student	to re	eceive	a Bessi	e and	Godfrey
1.	Naı	me of Applicant		Last		F:	irst		Middl	.e
2.	Но	me Address Stre	et or P	O Box	Number		Ci	ty	State	2
3.	Co.	llege			Major			_Class _		 :
4.	How long have you known the applicant?									
	In	what capacity?								
5.		ur evaluation the student's:	Fair	Good	Very	Good	Outs	tanding	Unob	served
	a.	Need for Scholarship		,						
	b.	Character		-	= =					<u> </u>
	c.	Appearance	=	-						
	d.	Industry								
	e.	Ability		<u> </u>	_ =					
	f.	Promise of use Citizenship	eful							 8
	g.	Performance, pand present	ast 		_ =					
	h.	Interest in study		-						· · · · · ·
	i.	Independence of thought	,		= =	_				
Addit.	ion	al Comments						- I for		

o. To what degree do you	recommend this applicant for a scholarship?
Highly Good Degree of	Confidence Fair Degree of Confidence
. What is your evaluation	on of the student's scholastic ability?
?op 5% Top 10% Top	p 20% Top 30% Top 40% Top 50%
Please comment on exceptions	al scholastic ability and accomplishments:
If possible, give you:	r evaluation of the candidate's financial need:
Very Great Great	Above Average Average
Below Average Very	y Little, if any Unknown
Please comment on unusual fi	inancial circumstances:
	Signed
	Title
	School District

You have the right to be informed by the school district of your rights under Section 504. This is a notice of you and your child's rights under Section 504 and the rights you have if you disagree with the school district's decisions.

WHAT IS SECTION 504?

Section 504 of the Rehabilitation Act of 1973, commonly called "Section 504," is a federal law that protects students from discrimination based on disability. Section 504 assures that students with disabilities have educational opportunities and benefits equal to those provided to students without disabilities. To be eligible, a student must have a physical or mental impairment that substantially limits one or more major life activity.

YOUR CHILD'S EDUCATION

Your child has the right to:

- Receive a free and appropriate public education.
- Participate in and benefit from the district's educational programs without discrimination.
- Be provided an equal opportunity to participate in the district's nonacademic and extracurricular activities.
- Be educated with students who do not have disabilities to the maximum extent appropriate.
- Be educated in facilities and receive services that are comparable to those provided to students without disabilities.
- Receive accommodations and/or related aids and services to allow your child an equal opportunity to participate in school activities.
- Receive educational and related aids and services without cost, except for those fees imposed on the parents of children without disabilities.
- Receive special education services if needed.

YOUR CHILD'S EDUCATIONAL RECORDS

You have the right to:

- Review your child's educational records and to receive copies at a reasonable cost. You will not be charged if the cost would keep you from reviewing the records.
- Ask the district to change your child's education records if you believe that they are wrong, misleading, or are otherwise in violation of your child's privacy rights. If the district refuses this request, you have the right to challenge the refusal by requesting an impartial hearing.
- A response to your reasonable requests for explanations and interpretations of your child's education records.

Your child has the right to an evaluation before the school determines if he or she is eligible under Section 504. You have the right to:

- Receive notice before the district takes any action regarding the identification, evaluation, and placement of your child.
- Have evaluation and placement decisions made by a group of persons, often called a "504 team", including persons who know your child, the meaning of the evaluation information, and the placement options available.
- Have evaluation decisions based on a variety of sources, such as aptitude and achievement tests, teacher recommendations, physical conditions, medical records, and parental observations.
- Refuse consent for the initial evaluation and initial placement of your child.

If your child is eligible under Section 504, your child has a right to periodic re-evaluations, including re-evaluations before any significant change is made in your child's placement.

IF YOU DISAGREE WITH THE DISTRICT'S DECISION

If you disagree with the district's decisions regarding your child's identification, evaluation, educational program, or placement under Section 504, you may request mediation or an impartial due process hearing. You and your child have the right to take part in the hearing and have an attorney represent you. Hearing requests and other concerns can be made to your district's Section 504 Coordinator:

Ashley Klein, School Psychologist 601 Washington St. Davenport, WA 99122 509-725-1481 ex. 1135 aklein@davenportsd.org

You have the right to file a complaint of discrimination with the U.S. Department of Education's Office for Civil Rights (OCR), or to file a complaint in federal court. Generally, an OCR complaint may be filed within 180 calendar days of the act that you believe was discriminatory. The regional office is located at 915 Second Ave, Room 3310, Seattle, WA 98174-1099. Phone: 206-607-1600/TDD: 206-607-1647

Website: www.ed.gov/OCR.