

24<sup>th</sup> Annual

# MICHAEL HORNIČEK memorial scholarship

Children of members of the

**Pennsylvania State Education Association (PSEA)**

working for a school district in Beaver County, PA are eligible to apply.\*

# \$2,500!!

Two scholarships will be awarded.

# ! APPLICATIONS DUE FEBRUARY 7, 2025

**Please see your Guidance Counselor for an application.**

\*Must be a member in good standing. High school seniors attending private schools who are children of PSEA members working in a school district in Beaver County are also eligible to apply.

# Michael Hornick Memorial Scholarship

## 2024-2025 Application for Consideration

The Michael Hornick Memorial Scholarship Selection Committee will award two individual **\$2,500\*** scholarships to the child of a member in good standing of the Pennsylvania State Education Association (PSEA) who works for a school district located in Beaver County, Pennsylvania (verified by signature of said parent).

The eligible applicant must be a high school senior or current college student enrolled in an undergraduate program in an accredited institution of higher education and must demonstrate a high degree of academic proficiency. High school seniors attending private schools who meet the above criteria are also eligible to apply.

### APPLICANT INFORMATION

\_\_\_\_\_  
First Name M.I. Last Name

\_\_\_\_\_  
Permanent Address Street City State Zip

\_\_\_\_\_  
Home Phone (Area Code/Number) Mobile Phone (Area Code/Number) Email Address

\_\_\_\_\_  
Name of Sponsoring Employee (PSEA Member)

Relationship to Applicant:  Mother

Father

\_\_\_\_\_  
Name of Affiliated Local Union (Local Association)

\_\_\_\_\_  
Name of School District Employing Member

\_\_\_\_\_  
Name of Local President

\_\_\_\_\_  
Local President's Phone (Area Code/Number)

### EDUCATION INFORMATION

#### Graduating High School Seniors

\_\_\_\_\_  
Current High School

\_\_\_\_\_  
Date of Graduation

\_\_\_\_\_  
Name of Guidance Counselor

\_\_\_\_\_  
Guidance Counselor's Phone (Area Code/Number)

\_\_\_\_\_  
Guidance Counselor's Email Address

\_\_\_\_\_  
College/University you are planning to attend

\_\_\_\_\_  
College/University Address

\_\_\_\_\_  
Financial Aid/Bursar's Phone (Area Code/Number)

\_\_\_\_\_  
Anticipated Major

\*A check in the amount of \$2,500 will be made payable to the college/university indicated above on behalf of the scholarship awardee.



**EDUCATION INFORMATION** *continued*

**Currently Enrolled College Students**

\_\_\_\_\_  
Current College/University

\_\_\_\_\_  
Address

\_\_\_\_\_  
Year Level for 2024-2025

\_\_\_\_\_  
Estimated Graduation Date

\_\_\_\_\_  
Major(s) / Minor(s) / Undeclared

\_\_\_\_\_  
Financial Aid/Bursar's Phone (Area Code/Number)

**EXTRA-CURRICULAR ACTIVITIES**

Please list participation in School-Related Organizations, Activities and Clubs

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list participation in Community-Related Organizations, Activities and Clubs

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Signature of Applicant**

I understand that the 2024-2025 Michael Hornick Scholarship application contains confidential information about me. I declare that all information provided is true and has been verified to the best of my ability.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Signature of Sponsoring Employee**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## SELECTION PROCESS

1. An application, approved by the Trustees and containing such other scholarship requirements as may be required by the Trustees, must be completed in its entirety by scholarship applicants.
2. Applications must be postmarked by February 7th of the year the scholarship is granted.
3. The procedure to be utilized by the Hornick Scholarship Selection Committee in selecting candidates for the Michael Hornick Memorial Scholarship is as follows:
  - a) Each Scholarship Selection Committee member shall individually score the scholarship applicants based on overall GPA with weight of classes considered in the ranking process.
  - b) Following the Committee members' completion of their preliminary rankings of the scholarship applicants, the Committee shall discuss the applications and rankings.
  - c) Following the Committee's discussion, Committee members may alter any of their rankings. Committee members shall then submit their final ranking of the scholarship applications.
  - d) The top scholarship applicant(s) will be selected based upon the highest composite scores of the applications.
  - e) A tied ranking may be broken through evaluation by the Hornick Scholarship Selection Committee following interviews (either phone or in-person) with the affected applicants.
  - f) Copies of all applications and rankings shall be maintained by the PSEA Scholarship Trust for seven years following the grant of the scholarship.
4. Two (2) applicants who meet all application criteria may be granted a Michael Hornick Memorial Scholarship.
5. The name of the applicant(s) recommended by the Hornick Scholarship Selection Committee will be sent to the Trustees for final approval.

## APPLICATION CHECKLIST

- ✓ Completed Application
- ✓ **Official** High School or College Transcripts
- ✓ Copy of College Acceptance Letter (if not yet enrolled)

All materials must be delivered by **5:00 p.m.** on **FRIDAY, FEBRUARY 7, 2025.**

If mailed, application package must be postmarked by **FRIDAY, FEBRUARY 7, 2025.**

Mail or deliver to:

**Hornick Memorial Scholarship  
c/o PSEA  
3033 New Butler Road  
New Castle, PA 16101**

### Notice of Failure to Complete in a Timely Manner

The Michael Hornick Memorial Scholarship Selection Committee reserves the right to deny incomplete or late submissions of scholarship applications. **NO EXCEPTIONS.**