



DCWC Scholarship Form

Darke County Wellness Challenge
835 Sweitzer Street
Greenville, Ohio 45331

Name: _____ Email: _____
Address: _____
Home Phone #: _____ Cell Phone #: _____
High School: _____ GPA: _____
Weighted GPA: _____ SAT Score: _____ ACT Score: _____
College Attending: _____
Cost for tuition/year: _____ Room/Board: _____
Bursar's Office Address: _____
Field of Study: _____

Father/Guardian:	Mother/Guardian:
Name: _____	Name: _____
Address: _____	Address: _____
Occupation: _____	Occupation: _____
Employer: _____	Employer: _____
Email: _____	Email: _____
Phone #: _____	Phone #: _____

Adjusted Family Gross Income for Previous year:

_____ Under \$50,000	_____ \$50,000-\$75,000	_____ \$75,000-\$100,000
_____ \$100,000-\$125,000	_____ \$125,000-\$150,000	_____ Over \$150,000

Requirements to be eligible:

1. Must attend at least **1** of the Darke County Wellness Challenge races in 2019 (either as a volunteer or participant) and/or participate in their local track or cross country teams.

*Please attach resume of activities, honors, community service, and an essay on what a healthy lifestyle means to you and the role it's played in your life. The application, resume, transcript and any other pertinent information should be sent to Darke County Wellness Challenge, 835 Sweitzer St, Greenville, Ohio 45331 and postmarked by October 31, 2019. If selected, students will need to be available to interview in November, 2019.

**No renewable scholarships.

For more information email us at dcwellnesschallenge@gmail.com or call 937-547-7409