

FRIENDS OF THE OGDEN FARMERS' LIBRARY SCHOLARSHIP FUND APPLICATION

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____

Parents: _____

Institute you have applied to or are attending:

Years of library employment: _____

Years of volunteering at the library: _____

I affirm that I have read and understand the conditions under which the scholarship application is accepted and agree to bind myself to them. I understand that the award is granted based on statements made as a part of the application and state that they are true to the best of my knowledge.

Signature: _____

Applications will be accepted January 1st to April 1st.

To:

Friends of the Library Scholarship Committee

C/O Ogden Farmers' Library

269 Ogden Center Road

Spencerport, NY 14559

***Winner(s) will be chosen at the April Friends' meeting. High school recipients will receive their check at the High School Awards Ceremony held in May.

Additional Guidelines:

Amount of the scholarships will be \$500 per year.

Two (2) scholarships will be offered per year, if budget monies permit.

Qualifications:

- **Must be employed or volunteer at the Ogden Farmers' Library**
- **Must have an OFL library card in good standing**
- **Must be accepted to or attending a college or trade school**

Scholarship monies will only be used for valid college or trade school expenses.

College or trade school attendance may be subject to verification.

Applicants must submit a completed application and a 500 word essay.

First time applicants will be given preference.

Essay criteria:

- **500 words**
- **Describe your chosen field of study**
- **Explain how your career will benefit humanity**
- **Spelling and grammar count**