

# The Gayle Clarke Memorial Scholarship

The Gayle Clarke Memorial Scholarship was established in memory of Gayle Clarke by the Jane Jefferson Democratic Club, the Montrose Democratic Party and the family of Gayle Clarke.

Gayle was known for her exceptional character, integrity, hard work and an ardent belief in giving back to the community by volunteering. She was a lifelong Democrat and was instrumental to the Democratic Party and the Jane Jeffersons. She had a passion for knowledge and education and had a strong belief in the standards of the democratic process. She was a leader, organizer, mediator, mentor and friend to all.

The annual scholarship was established to reward and encourage one graduating senior in Montrose County each year who has demonstrated both democratic ideals and active involvement in their community and school. The scholarship will be awarded to the deserving student who puts forth strong effort scholastically, gives back to their community through community service and shows leadership and dedication through involvement in extracurricular activities. **This is a \$1,500 non-renewable scholarship.** Entry deadline is April 20, 2018 by 5:00pm or postmarked by April 20, 2018. Scholarship award decision will be made in the beginning of May 2018.

## SCHOLARSHIP CRITERIA

- Graduating senior of Montrose County in the year of the application.
- Cumulative GPA of 2.75 or higher.
- Must be planning to attend a post-secondary institution in the fall of the year the scholarship is awarded. This includes: college, university, junior college, community college, technical institute, or vocational-technical school.
- Must show community and extracurricular involvement.

## REQUIRED ATTACHMENTS

- Gayle Clarke Scholarship Application
- High School Transcript
- Resume that includes academic history, work history, community service and extracurricular involvement
- 2 Letters of Recommendation (1/academic and 1/community)
- Two Essays — in essay format, answer the following questions:
  - ESSAY QUESTION #1: (maximum length: 2 pages)  
**What does the concept of democracy mean to you?**
  - ESSAY QUESTION #2: (maximum length: 1 page)  
**Which past United States President has inspired you the most and why?**

## DIRECTIONS

Please print out and complete the following 2-page application and submit it with the REQUIRED ATTACHMENTS by **April 20, 2018** in one of the following ways:

**Mail to:** The Gayle Clarke Memorial Scholarship, P.O. Box 2126, Montrose, CO 81402 (postmarked by April 20, 2018).

**Hand Deliver to:** Your school counselors' office if you are in the Montrose County School District RE-1J.

**Email a PDF file to:** GCMSCHOL@gmail.com. Please note "Gayle Clarke Scholarship" in the subject line and include all necessary attachments in a single email.

This application can be filled out electronically by downloading it from [montrosedemocrats.org/scholarship](http://montrosedemocrats.org/scholarship)

# The Gayle Clarke Memorial Scholarship Application Form

Please print or type your answers as legibly as possible! Also, complete all sections of the application thoroughly and accurately. Incomplete applications will not be considered for scholarship awards. If you choose fill out this form electronically, please click the Print button on page 3 and sign the application before mailing it with your supporting documents.

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## PERSONAL INFORMATION

Name \_\_\_\_\_  
Full Legal Name: First, Middle, Last

Date of Birth \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Current Age \_\_\_\_\_

Permanent Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

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## FAMILY INFORMATION

### Parent #1

Name \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Highest Level of Education completed \_\_\_\_\_

### Parent #2

Name \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Highest Level of Education completed \_\_\_\_\_

Number of Children Living at Home (Please attach additional sheet if needed.)

Name	Age

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## GPA

Weighted GPA \_\_\_\_\_ Class Rank \_\_\_\_\_ Class Size \_\_\_\_\_

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**FUTURE PLANS**

**Future Study Plans**

Please list the institution or college you are planning to attend. If you do not know yet, you may list up to three schools that you are considering.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**Briefly describe your future career plans**

We understand that this may change over time.

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

**Extenuating Circumstances Explanation**

If you have extenuating financial circumstances, please include that information below or on a separate sheet. This might include a serious illness in the family, a special needs child, etc.

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

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**RELEASE FOR MEDIA PUBLICATION**

If you are awarded a scholarship, MCSD and the individual scholarship sponsors may wish to share your name and picture for publicity, both in print and online.

- If selected, I authorize the use of my name and photograph for publicity purposes and I agree to attend all functions related to the presentation of this scholarship.
- If selected, I do NOT authorize the use of my name and photograph for publicity purposes.

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**STUDENT SIGNATURE**

By signing my full legal name, I certify that my application is complete and accurate to the best of my knowledge.

X \_\_\_\_\_ DATE \_\_\_\_\_

X \_\_\_\_\_ DATE \_\_\_\_\_

(parent signature, if student is under the age of 18)