

THE OIL HEAT INSTITUTE OF L.I. STUDENT SCHOLARSHIP AWARDS



The Oil Heat Institute of L.I. Student Scholarship Awards Program will provide three scholarships in 2019, two in the amount of \$1,000 and one for \$500. All awards will be made no later than July 11, 2019 and all checks will be made payable to both the scholarship recipient and the school they plan to attend.

Who is Eligible?

All applicants for OHILI Scholarships must be:

- Children of OHILI Regular, Wholesale or Associate Members and their employees; and
- High school seniors who will be enrolled as a full-time undergraduate at an accredited college or university, community college or vocation-technical school.

How Do Students and Parents Apply?

All student scholarship applicants must complete the Awards Application on the following pages. A fully completed application...with high school transcripts...must be returned to the Oil Heat Institute and postmarked no later than May 20, 2019.

How Are Scholarship Awards Determined?

A committee will review all applications received and scholarship awards will be granted on the basis of a student's academic record, leadership potential, school and community involvement or financial need.

Scholarship Award Application 2019

Student Applicant Data

Last Name _____ First Name _____ MI _____
Address _____
City/Town _____ State _____ Zip Code _____
Date of Birth: _____ Social Security#: _____
Phone: (____) _____ E-Mail Address: _____

High School Data

School Name _____ Graduation Date: Month _____ Year _____
City _____ State _____ Phone (____) _____

Post Secondary School Data

Name of post-secondary school you plan to attend
School Name _____ City _____ State _____
School Name _____ City _____ State _____
Type of Schools: 4 yr. College or University 2 yr Community or Junior College
 Vocational-Technical Other, explain
Major Course of study _____ Anticipated date of graduation _____

Student will: Live on campus Live off campus Commute from home

Activities Awards & Honors

List all school or community activities in which you have participated during the past four years (e.g.: student government, music, sports, Boy/Girl Scouts, hospital volunteer, Special Olympics, etc.) Indicate any special awards and honors.

Activity No. 1: _____ Awards & Honors _____
Activity No. 2: _____ Awards & Honors _____
Activity No. 3: _____ Awards & Honors _____

Goals & Aspirations

Write a brief statement about your career objectives and future goals.

Parent or Guardian Information

Last Name _____ First Name _____ MI _____
Job Title _____ Department _____ Length of Service _____
OHILI Member Company _____
City/Town _____ State _____
Work Phone (____) _____ Home Phone (____) _____
Relationship to Applicant _____
Is the applicant your dependent? Yes No
Number of children attending college in 2018-2019 including applicant: _____

Student's Financial Information

FINANCIAL AID:		ESTIMATED STUDENTS COSTS:	
College Work-Study Program	\$ _____	Tuition & Fees	\$ _____
Other Campus Employment	\$ _____	Room & Board	\$ _____
Scholarships & Grants	\$ _____	Books & Supplies	\$ _____
NYSHEC (Tuition Assistance)	\$ _____	Personal Expenses	\$ _____
Funds from other Sources	\$ _____	Transportation	\$ _____
TOTAL FINANCIAL AID:	\$ _____	TOTAL COSTS (Est):	\$ _____

Unusual Circumstances

Please indicate any special personal or financial circumstances you would like to bring to the attention of the Scholarship Committee.

Teacher/ Counselor/ Supervisor/ Evaluation

As his or her Guidance Counselor or Faculty Advisor, we would be grateful for any remarks you would care to make relative to the applicants general attitude or academic performance.

Name of School: _____

Address: _____

Evaluator's Name: _____ Title: _____

Signature: _____ Phone: (____) _____

Transcript Information

The applicant must include a high school transcript of their grades and have this section completed by the appropriate school official.

Applicant ranks _____ in a class of _____ Cumulative Grade Point Average _____/4.0

PSAT Verbal _____ Math _____ SAT Verbal _____ Math _____ ACT Verbal _____

School Officials Signature _____ Date _____ Title _____ Phone (____) _____

School Officials Address _____

City _____ State _____ Zip Code _____

Application Checklist

This application for a scholarship becomes complete and valid only when you have a returned the following materials:

- ✓ Student Application
- ✓ Current Transcript(s) of Grades to:

The student is responsible for submitting all materials to OHILI on time

Scholarship/Awards Fund
c/o Oil Heat Institute of L.I.
200 Parkway Drive S., Ste. 202
Hauppauge, NY 11788

Postmark Deadline is May 20, 2019

Selection of Recipients

OHILI Scholarship Committee has the sole responsibility for selecting recipients, basing their decision on the criteria set forth in this Brochure and Application. All decisions of the Committee are final.

Certification

In submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge. If requested, I agree to supply proof of any information I have provided on this form. I understand that falsification of information may result in termination of any scholarship granted.

Applicant's Signature _____ Date _____

Employee's Signature _____ Date _____

OHILI Company Employer's Signature _____ Date _____