

January 22, 2012

Dear PPW:

Each year the Maryland Association of Pupil Personnel awards scholarships to recognize the achievement of one or more high school seniors in the state of Maryland. The scholarship fund is named in memory of Glenn R. Munch. The intent of our scholarship is to honor selected students who have overcome adversity and made the readjustments necessary to succeed in high school and life and have become contributing members of the community.

Attached is an application for the MAPP Scholarship. Any senior who plans to attend post-secondary school is eligible to apply. **The student must complete the application, write an essay entitled "My Gift of Service", and submit two letters of recommendation (one must be from the PPW assigned to the school). The application must be signed by the student, the parent/guardian, and the PPW assigned to the school.** It will then be submitted to the local Student Services Department. The PPWs in each school system should review all applications and decide on ONE candidate from their county whose name and application will be submitted to the MAPP Scholarship Committee. The MAPP Scholarship Committee will review and evaluate all completed applications and determine the recipients of the scholarships.

All applications must be postmarked by **Friday, March 30, 2012**. Please mail applications to:

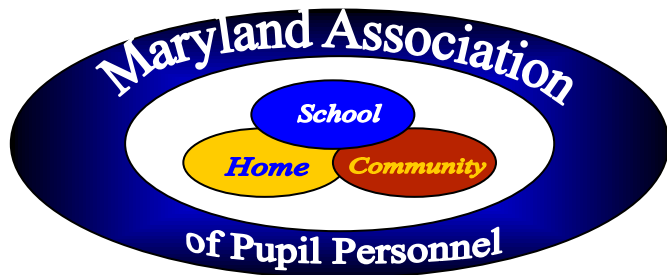
Mrs. Catherine Chapman, PPW  
Howard County Public School System  
10920 Rt. 108  
Ellicott City, MD 21042

Please note that the PPW assigned to the applicant's school must sign the scholarship application, verify that the student is planning to graduate in 2012, write a letter of recommendation for the applicant and be an active member of MAPP at the time the application is received. If you have any questions, please call me at 410-313-6650.

Thank you in advance for helping us identify and honor deserving young people in the state of Maryland.

Respectfully,

Catherine Chapman  
Pupil Personnel Worker  
MAPP Scholarship Committee Chairperson



## Glenn R. Munch Scholarship Application

Please type or print clearly:

### Student Information

Full Name \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Number and Street

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

Telephone \_\_\_\_\_  
Home Cell

Date of Birth \_\_\_\_\_ Social Security Number \_\_\_\_\_

### Parent/Guardian Information

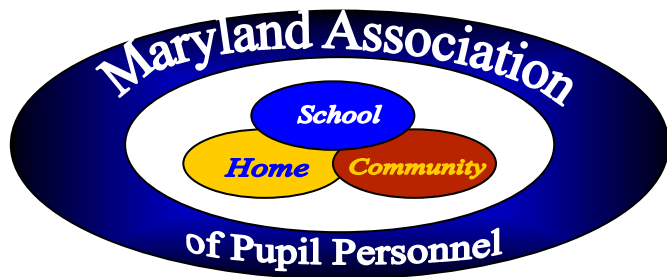
Name \_\_\_\_\_

Address (if different from above) \_\_\_\_\_

Telephone \_\_\_\_\_  
Day Evening

### List Sibling Information

Names	Age	Grade
_____		
_____		
_____		
_____		



**High School Information**

School \_\_\_\_\_

Address \_\_\_\_\_

Telephone Number \_\_\_\_\_

Counselor's Name \_\_\_\_\_

List organizations/activities in which you are currently involved.

School Organizations/Activities \_\_\_\_\_

\_\_\_\_\_

Community Organizations/Activities

Other \_\_\_\_\_

If you work, please identify where you work and your responsibilities at your place of employment

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

Please list all schools (colleges, universities and/or technical schools) you have applied to and identify which schools have sent you a letter of acceptance.

School	Letter of Acceptance?
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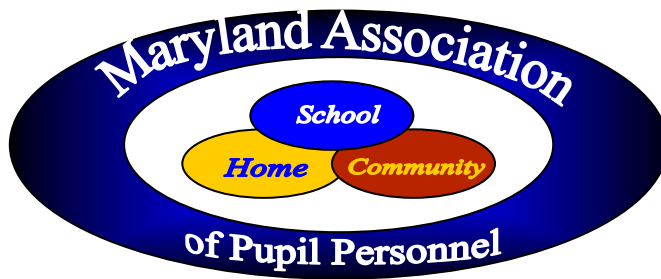
_____	_____
_____	_____
_____	_____

Have you been offered other scholarships or grants? \_\_\_\_\_

If yes, please list each:

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

What is your expected major or program focus? \_\_\_\_\_



**Essay**

On a separate sheet of paper, write an essay on the topic, “**My Gift of Service**”. Your essay should address your community service activities (including those on the state or national level), services and activities that you have organized or participate in to support others or your efforts within your community, religious organizations, and/or school, etc. Your essay will be evaluated on language mechanics, coherence, unity, clarity of expression and appearance.

**YOUR ESSAY MUST BE ONE TYPED PAGE.**

In a sealed envelope, please provide two letters of reference. The Pupil Personnel Worker assigned to your high school must write one letter. A teacher, counselor, minister, employer or any responsible adult other than a relative can write the other letter.

Please be advised that names and pictures of recipients of the MAPP scholarship may be used in future publications/communications (PPW directory, local newspapers, BOE presentations, MAPP conferences etc.). Your signature below indicates your acknowledgement and approval of this.

The following signatures are required for application consideration:

Submitted By:

\_\_\_\_\_  
APPLICANT

\_\_\_\_\_  
PARENT / GUARDIAN

\_\_\_\_\_  
PUPIL PERSONNEL WORKER

<p><b>Pupil Personnel Worker Only:</b> <b>Your signature above verifies that this student is on track to graduate in 2012.</b> Are you a current member of MAPP?                      <b>Yes</b>                      <b>No</b></p>
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Date received by local Screening Committee                      \_\_\_\_\_

Date received by MAPP Scholarship Committee                      \_\_\_\_\_