

**Scholarship Application**  
**Adams County Home & Community Education Association for**  
**Villa McMahon \$750 Memorial Scholarship**

Requirements:

- Adams County Wisconsin Resident
- Preference (not required) may be given to a child or grandchild of a current Adams County Home & Community Education member
- 3.0 grade point average – attach a copy of your transcript – an unofficial copy is acceptable
- Achieved Junior status at a 4-year College/University or 2<sup>nd</sup> year at a Vocational/Technical College
- 25 hours volunteer community service in last 2 years
- Pursue a major of your choice. Preference may be given to Agriculture or Family and Consumer Sciences majors
- Two (2) recommendations, one must be an instructor to be mailed separately (you might want to include a stamped addressed envelope)
- Complete Photo Release form
- Submit application to Extension Adams County by April 1 to:
  - Extension Adams County
  - Attn: Villa McMahon Scholarship Committee
  - 569 N Cedar St, Suite 3
  - Adams WI 53910

History of Scholarship:

Villa McMahon, born on August 12, 1907, led an active and impressive life. Villa was a dedicated Home & Community Educator (HCE) in Adams County. Her mother-in-law got her interested in Home & Community Educators (then called Extension Homemakers) when she was a young bride. She led a busy life as a mother and a teacher in country schools around the Grand Marsh area. She worked at the Badger Ordinance Plant in Sauk County and then cooked for several years at the Grand Marsh School. An active 4-H leader of the Grand Marsh Queens Villa also was town clerk for Lincoln township for 20 years. She had two daughters, Roberta McMahon-Sindelar and Gladys McMahon-Manthey and eight grandchildren.

Winners will be announced at the annual Spring Banquet of HCE. The scholarships are awarded in two parts – first half upon proof of registration for first semester and second half upon proof of second semester registration.

This scholarship, currently \$750 was named in her honor in 1978 because of her many contributions as a Home & Community Educator serving all officer positions in the Grand Marsh Harmony Homemakers. She was elected County HCE President for 1977 – 78 term, but passed away on November 19, 1977 in the middle of her term.

Deadline: Application and recommendations (mailed separately) must be postmarked by April 1 of the application year to address listed above.

Additional fillable forms available at the Wisconsin Association for Home and Community Education, Inc. website:  
<https://wahceinc.org/adams-county-hce/> Scroll down the page and click on the Villa McMahon form.

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Date: \_\_\_\_\_ County & Town of Current Residence \_\_\_\_\_

Name: \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_

Mother \_\_\_\_\_

Father \_\_\_\_\_

Name of family member who is a current HCE member \_\_\_\_\_

High School attended \_\_\_\_\_ Year of Graduation \_\_\_\_\_

College or Vocational school attending \_\_\_\_\_

Major Area of study \_\_\_\_\_

Cumulative G.P.A. \_\_\_\_\_ Anticipated Year of Graduation \_\_\_\_\_

*(If you need extra room for any of the following questions, please use blank sheets as needed.)*

What is your long-range career goal? Why?

List all College and co-curricular activities involvement in indicating any leadership positions. Do not include classes for which you received credit.

List any non school-related activities or community services or projects involvement indicating leadership positions and your hours and activities of volunteer contributions (should be a minimum of 25 hours over two years.)

Explain how you are financing your education.

Provide a brief summary, describing how this scholarship award will help you achieve the educational goal you have set for yourself.

Include any additional information which you feel may be pertinent to this application.

*I give my permission to release this application and a transcript of my grades to the Adams County Home & Community Education Association Scholarship Committee. I certify that this application is true to the best of my knowledge and that I personally completed this application. If I am awarded this scholarship, I understand that any change in my educational plans may jeopardize my qualifying for the scholarship. I understand that this scholarship will be awarded in 2 parts, the first half upon proof of registration in my planned educational program at college/university and the second half upon proof of second semester registration.*

Signed \_\_\_\_\_ Date \_\_\_\_\_

Scholarships are provided by the Adams County Home and Community Education (HCE) Association.

## STUDENT SCHOLARSHIP REFERENCE FORM

Name of Applicant: \_\_\_\_\_

The above-named student has given your name as a reference in evaluating their scholarship application. Your experiences and insight will aid us in our consideration and help us distinguish this applicant from others. Please be specific, frank and concise. You need NOT list the applicant's activities, grades or future plans. Those are reported in the application form completed by the student. All information will be held in confidence.

The information you provide personalizes the recommendation. Add details about the student in the area in which you know them. Keep in mind that your comments make this student a "real person," and not just an application in front of the selection committee.

Finally, it is your recommendation that provides true insight into who this student is—give specific examples and not broad generalizations. If you say the student is responsible, please give a specific example to illustrate your point.

	Below Average	Average	Above Average	Excellent	No Knowledge
Scholarship					
Leadership					
Adaptability					
Initiative					
Reliability					
Integrity					
Self-Discipline					

Explain why you feel this student is worthy of a scholarship. If teacher or coach, give the subject. Please include length of time you have known student and any additional comments. Please use blank sheets as needed.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Print Name \_\_\_\_\_

Title \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_