

The Roberta L. Houpt Fund Scholarship Application

Applicant Information

Please use proper capitalization, i.e. John A Smith not JOHN A SMITH or john a smith

Prefix e.g., Mr., Miss, Ms., Mrs. Miss	First Name Sarah	Middle Initial K	Last Name Magee	Suffix e.g., Jr.
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Pronoun
e.g., he, she, they
she

Nickname or Preferred Name

Address 1 Street Address 6 Mill Road	Address 2 Apt./Unit #
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City Shermans Dale	County Perry County	State Pennsylvania	Zip Code 17090
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Phone
XXX-XXX-XXXX
717-582-6637

E-mail Address
Please provide an e-mail address you will continue to check throughout the year
magee920@embarqmail.com

Date of Birth August 27, 2002	Gender Female
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Are you Married? No	Name of Spouse if applicable
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Number of Dependents and Age(s)
if applicable

Family Information

Parent 1 / Caregiver 1

Relationship to Applicant

Mother

Prefix First Name Middle Initial Last Name
e.g., Mr., Miss, Ms., Mrs. Karen M Magee
Mrs.

Pronoun
e.g., he, she, they
she

Employer Occupation
West Perry School District School Nurse

Address 1 Address 2
Home Address Apt./Unit #
6 Mill Road

City State Zip
Shermans Dale PA 17090

Home Phone Work Phone Cell Phone
xxx-xxx-xxxx xxx-xxx-xxxx xxx-xxx-xxxx
717-582-6844

E-mail Address

Please provide an e-mail address that is checked regularly
magee97@embarqmail.com

Parent 2 / Caregiver 2

Relationship to Applicant

Father

Prefix First Name Middle Initial Last Name
e.g., Mr., Miss, Ms., Mrs. Charles T Magee
Mr.

Pronoun
e.g., he, she, they
he

Employer Occupation
Vitro Inc. Senior Engineering Associate

Address 1 Address 2
Home Address Apt./Unit #
6 Mill Road

City State Zip
Shermans Dale PA 17090

Home Phone Work Phone Cell Phone

XXX-XXX-XXXX

XXX-XXX-XXXX

XXX-XXX-XXXX
717-645-9740

E-mail Address

Please provide an e-mail address that is checked regularly

Father Deceased?

No

Mother Deceased?

No

Parents Divorced?

No

Are you the first in your family to attend college?

No

List names, ages, and educational levels of siblings living in your household:

Name, Age, Grade, or Year in College & Name of College

Kaylee Elizabeth Magee, 20, sophomore at Penn State University Madeline Grace Magee, 15, 10th

Please provide any additional information regarding your family, if necessary:

High School Information

High School Attended/Attending

West Perry

High School Address 1

2608 Shermans Valley Road

High School Address 2

City

Elliottsburg

State

Pennsylvania

Zip Code

17024

High School Graduation Date

June 04, 2020

Cumulative GPA

92.68

Cumulative Class Rank

19

Total H.S. Class Size

153

If you are currently in high school, please provide your school counselor's name and contact information below.

Prefix

e.g., Mr., Miss, Ms., Mrs.
Mrs.

First Name

Mandy

Last Name

Zeigler

Phone

XXX-XXX-XXXX

E-mail Address

mzeigler@westperry.org

Post-Secondary Information & Educational Financing

If you are currently in high school, please list the colleges/universities to which you have applied and indicate your acceptance status.

College/University 1

Acceptance Status

Bloomsburg University Yes

College/University 2 Acceptance Status

Mansfield University Yes

College/University 3 Acceptance Status

Indiana University of Pennsylvania Yes

Year in college for upcoming school year

Freshman

Major and minor field of study

Nursing BSN

Check this box if you plan to be a full-time student.

Yes

If you do not plan to be a full-time student,

how many credit hours are you planning to take?

Expected College Graduation Date

May 11, 2024

Please provide educational financing information for the school you will attend in the fall.
If you are unsure of what school you will attend, please provide information for your first choice school.

ALL DOLLAR FIGURES SHOULD REFLECT EXPENSES FOR ONE FULL ACADEMIC YEAR

School

Bloomsburg University

Expected Annual Tuition & Fees

Total dollar figure for both fall & spring semesters

21,000

Expected Annual Room & Board

Total dollar figure for both fall & spring semesters

n/a

Expected Annual Textbooks & Supplies

Total dollar figure for both fall & spring semesters

n/a

Where do you plan to live during the school year?

Please indicate if you will be living in campus housing, commuting, living off campus etc.

campus housing

Are you financing your own education?

Partial

How much of your education are you financing?

dollar figure for one academic year

If no or partial, who is helping to finance your education?

How much of your education are they supporting?

dollar figure for one academic year

Do you plan to take out student loans for the upcoming year?

Loans include federal subsidized, unsubsidized, and private loans

No

If yes, how much?

dollar figure

Do you plan to have employment during the academic year?

Employment includes participating in a work study program and private employment

Yes

If yes, how many hours will you work per week? How much will you earn?

Include hours and dollar figure

Use the space below to describe how you will finance the total of your education and provide any clarification needed for the answers given above.

During my four years on campus I will get a job somewhere on campus, like at the library, or somewhere close off campus. As I become more qualified I will apply for internships or to nursing homes to gain experience in the nursing field and earning

money. Then over the summers I would get one or more part-time jobs. My parents do have a college fund for me to help pay for some of my education, but I will be setting aside a certain part of my paychecks to pay off student loans and my college education.

Attachments

Title	File Name
FAFSA Student Aid Report	Sarah fafsa.pdf
Student Resume	Student+Resume+Num. +1.docx
Student Resume	Student Resume Num. 2.pdf
Other Scholarship Information	Other Scholarship Information (3).pdf
Letter of Reference	s magee Houpt.docx
Letter of Reference	scan_csalinetto_2020-03-17-08-24-45.pdf
Letter of Acceptance for a Nursing Program	Acceptance Letter.docx
Personal Essay	Roberta L. Houpt Fund Scholarship Essay.docx



OTHER SCHOLARSHIP INFORMATION

Please list all other scholarships you have applied for (attach an additional sheet of paper if more space is needed):

Scholarship Name	Received	Amount
Frank M. Magee Jr. Memorial Scholarship Fund	Pending	Amount: \$N/A
Harry N. and Melva A. Derkinson Fund Scholarship	Pending	Amount: \$N/A
Cantor and Team Orthodontics Scholarship	Pending	Amount: \$500.00
The CODY Foundation Fund Scholarship	Pending	Amount:\$500.00
HFC/JLC Memorial Scholarship	Pending	Amount: \$2,000.00
Megan Moyer Seiber Memorial Scholarship	Pending	Amount: \$N/A
Irvin E. Herr Foundation Scholarship	Pending	Amount: \$1,750.00
Future Nurse Scholarship	Pending	Amount: \$N/A
Carlisle Area Healthcare Auxiliary Scholarship	Pending	Amount: \$N/A

- Yes No Pending Amount: \$
- Yes No Pending Amount: \$
- Yes No Pending Amount: \$
- Yes No Pending Amount: \$
- Yes No Pending Amount: \$
- Yes No Pending Amount: \$
- Yes No Pending Amount: \$
- Yes No Pending Amount: \$
- Yes No Pending Amount: \$
- Yes No Pending Amount: \$
- Yes No Pending Amount: \$
- Yes No Pending Amount: \$
- Yes No Pending Amount: \$
- Yes No Pending Amount: \$
- Yes No Pending Amount: \$
- Yes No Pending Amount: \$
- Yes No Pending Amount: \$



STUDENT RESUME

List any school, community, and faith-based activities in which you have been involved in the last four years and note if it was while in high school (HS) or college (C). Be sure to include leadership roles and number of hours (hours per week/month/year, whichever is applicable). Make additional copies of this page if more space is needed.

School Activities	HS	C	Timeframe	FR	SO	JR	SR	Total # Hours
			Month(s) & Year(s)					
Field Hockey	X	<input type="checkbox"/>	Aug-Oct 2016-19	X	X	X	X	135
Track and Field	X	<input type="checkbox"/>	Mar-May 2017-20	X	X	X	X	140
Fall Play	X	<input type="checkbox"/>	Oct-Nov 2017-19	<input type="checkbox"/>	X	X	X	100
Spring Musical	X	<input type="checkbox"/>	Dec-Mar 2016-20	X	X	X	X	150
Yearbook Club	X	<input type="checkbox"/>	Aug-Jun 2018-20	<input type="checkbox"/>	<input type="checkbox"/>	X	X	52
National Honor Society	X	<input type="checkbox"/>	Aug-Jun 2018-20	<input type="checkbox"/>	<input type="checkbox"/>	X	X	10
Student Christian Fellowship	X	<input type="checkbox"/>	Aug-Jun 2016-19	X	X	X	<input type="checkbox"/>	5

Community & Faith-based Activities	HS	C	Timeframe	FR	SO	JR	SR	Total # Hours
			Month(s) & Year(s)					
UMC Mission Trip	X	<input type="checkbox"/>	Jun-Jul 2018	<input type="checkbox"/>	X	<input type="checkbox"/>	<input type="checkbox"/>	45
Bethesda Women's Mission	X	<input type="checkbox"/>	Feb 2016	X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3
Trash Bash	X	<input type="checkbox"/>	Apr 2014-19	X	X	X	<input type="checkbox"/>	5
Post Fire Clean-up	X	<input type="checkbox"/>	Jun- Aug 2018	<input type="checkbox"/>	<input type="checkbox"/>	X	<input type="checkbox"/>	5
Worship Set up	X	<input type="checkbox"/>	Jun 2018- Sept 2019	<input type="checkbox"/>	<input type="checkbox"/>	X	X	25
Duncannon Holiday Food Bank	X	<input type="checkbox"/>	Dec 2015-19	X	X	X	X	3
Faithworks	X	<input type="checkbox"/>	Jan 2017	X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2

Awards & Honors	HS	C	FR	SO	JR	SR	Year
4-H Clover Awards	X	<input type="checkbox"/>	X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2016
GPA Bronze Medal (Top 33%)	X	<input type="checkbox"/>	X	X	<input type="checkbox"/>	<input type="checkbox"/>	2017-18
GPA Silver Medal (Top 22%)	X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	X	<input type="checkbox"/>	2019
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Work Experience		Dates of Employment	Average Hours Worked Per Week
Employer	Position		
Sample Vegetable Farm	Manual Labor	May 2018-present	4 Hours
TJMaxx Co.	Sales Associate	July 2019-present	8-12 Hours



STUDENT RESUME

List any school, community, and faith-based activities in which you have been involved in the last four years and note if it was while in high school (HS) or college (C). Be sure to include leadership roles and number of hours (hours per week/month/year, whichever is applicable). Make additional copies of this page if more space is needed.

School Activities	HS	C	Timeframe	FR	SO	JR	SR	Total # Hours
			Month(s) & Year(s)					
Concert Band	X	<input type="checkbox"/>	Aug-May 2016-20	X	X	X	X	260
Community Service Club	X	<input type="checkbox"/>	Aug-May 2019-20	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	X	50
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

Community & Faith-based Activities	HS	C	Timeframe	FR	SO	JR	SR	Total # Hours
			Month(s) & Year(s)					
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

Awards & Honors	HS	C	FR	SO	JR	SR	Year

_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

Work Experience	Employer	Position	Dates of Employment	Average Hours Worked Per Week
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____



HUSKY ID: skm12430
PASSWORD: hW378Gnt
STUDENT ID: 444773

Sarah Magee
6 Mill Road
Shermans Dale, PA 17090
December 10, 2019



Your Onward and Upward Await

Sarah,

Congratulations! On behalf of the faculty and staff at Bloomsburg University, it is my pleasure to offer you admission as a first-year student for the 2020 Fall semester. Your program of study is Nursing BSN.

For over 175 years, Bloomsburg University has welcomed students with a forward focus and a fierce determination to achieve. We were founded on the belief that opportunity belongs to those who are ready to work for it and unafraid to do something great with it. If you choose to join the Husky Pack, you will be joining a family of over 9,000 students, 1,000 dedicated faculty and staff, and more than 76,000 alumni who call this place home.

If you are ready to unleash your potential, and BU is your place, your tomorrow begins today. Use your Husky ID and password (upper left corner of this letter) to log into your MyHusky account and pay your \$200 non-refundable deposit by May 1, 2020 (bloomu.edu/deposit) to secure your place. We look forward to seeing you on campus in the coming academic year!

CHRISTOPHER J. LAPOS
Associate Vice President of Admissions



2020-2021

Electronic Student Aid Report (SAR)

The SAR summarizes the information you submitted on your 2020-2021 Free Application for Federal Student Aid (FAFSA).

Application Receipt Date:	10/12/2019	XXX-XX-5269 MA 02
Processed Date:	12/18/2019	EFC: 19476
		DRN: 8330

Comments About Your Information

Learn about [federal tax benefits for education](#), including the *American Opportunity Tax Credit* (AOTC).

Based on the information we have on record for you, your EFC is 19476. You are not eligible for a Federal Pell Grant but you may be eligible for other aid. Your school will use your EFC to determine your financial aid eligibility for other federal grants, loans, and work-study, and possible funding from your state and school.

WHAT YOU MUST DO NOW (Use the checklist below to make sure that all of your issues are resolved.)

If you need to make corrections to your information, click 'Make FAFSA Corrections' on the 'My FAFSA' page using your FSA ID. If you need additional help with your SAR, contact your school's financial aid office or click the 'Help' icon on the FAFSA home page. If your mailing address or e-mail address changes, you can make the correction online.

FAFSA Data

Assumed fields, based on the data you entered, are marked with an '*' (asterisk) sign.

1. Student's Last Name:	MAGEE
2. Student's First Name:	SARAH
3. Student's Middle Initial:	K
4. Student's Permanent Mailing Address:	6 MILL ROAD
5. Student's Permanent City:	SHERMANS DALE
6. Student's Permanent State:	PA
7. Student's Permanent ZIP Code:	17090
8. Student's Social Security Number:	XXX-XX-5269
9. Student's Date of Birth:	08/27/2002
10. Student's Telephone Number:	(717) 582-6691
11. Student's Driver's License Number:	33175801
12. Student's Driver's License State:	PA
13. Student's E-mail Address:	magee920@embarqmail.com
14. Student's Citizenship Status:	YES, I AM A U.S. CITIZEN (OR U.S. NATIONAL)
15. Student's Alien Registration Number:	
16. Student's Marital Status:	I AM SINGLE
17. Student's Marital Status Date:	
18. Student's State of Legal Residence:	PA
19. Was Student a Legal Resident Before January 1, 2015?	YES
20. Student's Legal Residence Date:	
21. Is the Student Male or Female?	FEMALE
22. Register Student With Selective Service System?	
23. Drug Conviction Affecting Eligibility?	ELIGIBLE FOR AID
24. Parent 1 Educational Level:	COLLEGE OR BEYOND
25. Parent 2 Educational Level:	COLLEGE OR BEYOND
26. High School or Equivalent Completed?	HIGH SCHOOL DIPLOMA
27a. Student's High School Name:	WEST PERRY SHS
27b. Student's High School City:	ELLIOTTSBURG
27c. Student's High School State:	PA
28. First Bachelor's Degree before 2020-2021 School Year?	NO
29. Student's Grade Level in College in 2020-2021:	NEVER ATTENDED COLLEGE/1ST YR.
30. Type of Degree/Certificate:	1ST BACHELOR'S DEGREE
31. Interested in Work-study?	YES
32. Student Filed 2018 Income Tax Return?	ALREADY COMPLETED
33. Student's Type of 2018 Tax Form Used:	Transferred from the IRS
34. Student's 2018 Tax Return Filing Status:	SINGLE
35. Student Filed Schedule 1?	
36. Student's 2018 Adjusted Gross Income:	Transferred from the IRS
37. Student's 2018 U.S. Income Tax Paid:	Transferred from the IRS
38. Student's 2018 Income Earned from Work:	Transferred from the IRS
39. Spouse's 2018 Income Earned from Work:	
40. Student's Total of Cash, Savings, and Checking Accounts:	\$3,000
41. Student's Net Worth of Current Investments:	\$0
42. Student's Net Worth of Businesses/Investment Farms:	\$0
43a. Student's Education Credits:	Transferred from the IRS
43b. Student's Child Support Paid:	\$0
43c. Student's Taxable Earnings from Need-Based Employment Programs:	\$0
43d. Student's College Grant and Scholarship Aid Reported to IRS as Income:	\$0
43e. Student's Taxable Combat Pay Reported in AGI:	\$0
43f. Student's Cooperative Education Earnings:	\$0
44a. Student's Payments to Tax-Deferred Pensions & Retirement Savings:	\$0
44b. Student's Deductible Payments to IRA/Keogh/Other:	Transferred from the IRS
44c. Student's Child Support Received:	\$0
44d. Student's Tax Exempt Interest Income:	Transferred from the IRS
44e. Student's Untaxed Portions of IRA Distributions and Pensions:	Transferred from the IRS
44f. Student's Housing, Food, & Living Allowances:	\$0
44g. Student's Veterans Noneducation Benefits:	\$0
44h. Student's Other Untaxed Income or Benefits:	\$0
44i. Money Received or Paid on Student's Behalf:	\$0
45. Student Born Before January 1, 1997?	NO
46. Is Student Married?	NO
47. Working on Master's or Doctorate in 2020-2021?	NO
48. Is Student on Active Duty in U.S. Armed Forces?	NO
49. Is Student a Veteran?	NO
50. Does Student Have Children He/She Supports?	NO
51. Does Student Have Dependents Other than Children/Spouse?	NO
52. Parents Deceased?/Student Ward of Court?/In Foster Care?	NO
53. Is or Was Student an Emancipated Minor?	NO
54. Is or Was Student in Legal Guardianship?	NO
55. Is Student an Unaccompanied Homeless Youth as Determined by High School/Homeless Liaison?	NO
56. Is Student an Unaccompanied Homeless Youth as Determined by HUD?	NO
57. Is Student an Unaccompanied Homeless Youth as Determined by Director of Homeless Youth Center?	NO
58. Parents' Marital Status:	MARRIED OR REMARRIED
59. Parents' Marital Status Date:	09/1997
60. Parent 1 (Father's/Mother's/Stepparent's) Social Security Number:	XXX-XX-6900

61. Parent 1 (Father's/Mother's/Stepparent's) Last Name:	MAGEE
62. Parent 1 (Father's/Mother's/Stepparent's) First Name Initial:	C
63. Parent 1 (Father's/Mother's/Stepparent's) Date of Birth:	08/07/1966
64. Parent 2 (Father's/Mother's/Stepparent's) Social Security Number:	XXX-XX-7911
65. Parent 2 (Father's/Mother's/Stepparent's) Last Name:	MAGEE
66. Parent 2 (Father's/Mother's/Stepparent's) First Name Initial:	K
67. Parent 2 (Father's/Mother's/Stepparent's) Date of Birth:	10/31/1969
68. Parents' E-mail Address:	magee97@embarqmail.com
69. Parents' State of Legal Residence:	PA
70. Were Parents Legal Residents Before January 1, 2015?	YES
71. Parents' Legal Residence Date:	
72. Parents' Number of Family Members in 2020-2021:	5
73. Parents' Number in College in 2020-2021 (Parents Excluded):	2
74. Parents Received Medicaid or Supplemental Security Income?	NO
75. Parents Received SNAP?	NO
76. Parents Received Free/Reduced Price Lunch?	NO
77. Parents Received TANF?	NO
78. Parents Received WIC?	NO
79. Parents Filed 2018 Income Tax Return?	ALREADY COMPLETED
80. Parents' Type of 2018 Tax Form Used:	Transferred from the IRS
81. Parents' 2018 Tax Return Filing Status:	MARRIED-FILED JOINT RETURN
82. Parents Filed Schedule 1?	
83. Is Parent a Dislocated Worker?	
84. Parents' 2018 Adjusted Gross Income:	Transferred from the IRS
85. Parents' 2018 U.S. Income Tax Paid:	Transferred from the IRS
86. Parent 1 (Father's/Mother's/Stepparent's) 2018 Income Earned from Work:	\$108,471
87. Parent 2 (Father's/Mother's/Stepparent's) 2018 Income Earned from Work:	\$48,000
88. Parents' Total of Cash, Savings, and Checking Accounts:	\$20,000
89. Parents' Net Worth of Current Investments:	\$0
90. Parents' Net Worth of Businesses/Investment Farms:	\$0
91a. Parents' Education Credits:	Transferred from the IRS
91b. Parents' Child Support Paid:	\$0
91c. Parents' Taxable Earnings from Need-Based Employment Programs:	\$0
91d. Parents' College Grant and Scholarship Aid Reported to IRS as Income:	\$0
91e. Parents' Taxable Combat Pay Reported in AGI:	\$0
91f. Parents' Cooperative Education Earnings:	\$0
92a. Parents' Payments to Tax-Deferred Pensions & Retirement Savings:	\$6,759
92b. Parents' Deductible Payments to IRA/Keogh/Other:	Transferred from the IRS
92c. Parents' Child Support Received:	\$0
92d. Parents' Tax Exempt Interest Income:	Transferred from the IRS
92e. Parents' Untaxed Portions of IRA Distributions and Pensions:	Transferred from the IRS
92f. Parents' Housing, Food, & Living Allowances:	\$0
92g. Parents' Veterans Noneducation Benefits:	\$0
92h. Parents' Other Untaxed Income or Benefits:	\$0
93. Student's Number of Family Members in 2020-2021:	
94. Student's Number in College in 2020-2021:	
95. Student Received Medicaid or Supplemental Security Income?	NO
96. Student Received SNAP?	NO
97. Student Received Free/Reduced Price Lunch?	NO
98. Student Received TANF?	NO
99. Student Received WIC?	NO
100. Is Student or Spouse a Dislocated Worker?	
101a. First Federal School Code:	003324
101b. First Housing Plans:	ON CAMPUS
101c. Second Federal School Code:	003315
101d. Second Housing Plans:	ON CAMPUS
101e. Third Federal School Code:	003329
101f. Third Housing Plans:	ON CAMPUS
101g. Fourth Federal School Code:	003277
101h. Fourth Housing Plans:	ON CAMPUS
101i. Fifth Federal School Code:	
101j. Fifth Housing Plans:	
101k. Sixth Federal School Code:	
101l. Sixth Housing Plans:	
101m. Seventh Federal School Code:	
101n. Seventh Housing Plans:	
101o. Eighth Federal School Code:	
101p. Eighth Housing Plans:	
101q. Ninth Federal School Code:	
101r. Ninth Housing Plans:	
101s. Tenth Federal School Code:	
101t. Tenth Housing Plans:	
102. Date Completed:	10/12/2019
103. Signed By:	BOTH STUDENT AND PARENT
104. Preparer's Social Security Number:	
105. Preparer's Employer Identification Number (EIN):	
106. Preparer's Signature:	

Graduation/Retention/Transfer Rates

College Rates

The table shows the [graduation, retention, and transfer rates](#) for the schools you selected. Go to the [College Scorecard](#) Web site for complete information.

School Name	Graduation Rate	Retention Rate	Transfer Rate	Additional Information from <i>College Scorecard</i>
MANSFIELD UNIVERSITY	51%	71%	27%	N/A
BLOOMSBURG UNIVERSITY OF PA	60%	75%	29%	N/A
PENNSYLVANIA STATE UNIVERSITY (THE)	85%	93%	0%	N/A
INDIANA UNIVERSITY OF PENNSYLVANIA	55%	73%	29%	N/A

Your Financial Aid History Information

The information below is the total amount of student loans that you owe. These loans are administered by the U.S. Department of Education (ED). You should confirm that these loan totals are correct. You can view details on the individual loans that make up these totals at the [National Student Loan Data System \(NSLDS\)](#) Web site. If you feel that the amounts listed on this page are incorrect, or you have other questions related to a loan, you should contact the loan servicer indicated on the NSLDS Web site. You can obtain general information about each of the types of loans that are listed below by visiting our [StudentAid.gov](#) Web site.

Note that the "Subsidized" and "Unsubsidized" amounts include the appropriate portions of any Consolidation Loans you may have. If there is an amount listed for "Unallocated Consolidation Loans" it is because we could not determine whether those balances were subsidized or unsubsidized.

Remember you are responsible for repaying all of the amounts that you borrow, plus interest. As a general rule, with an assumed interest rate of 5%, the monthly payment amount over a ten-year repayment period would be approximately \$10.61 for every \$1,000 that you borrowed. Of course your actual repayment amount will depend upon how much you borrow, the interest rate when you enter repayment, and how long your repayment term is.

Total Amount of Loans Outstanding -			
FFEL (Bank Loans) and/or Direct Loans:	Total Principal Balance	Remaining Amount to be Disbursed	Total
Subsidized Loans:			
Unsubsidized Loans:			
Combined Loans:			
Unallocated Consolidation Loans:			
Federal Perkins Loan Amounts:			
Total Outstanding Principal Balance:			
2020-2021 Loan Amount:			
TEACH Grants Converted to Direct Loans:			
Unsubsidized Loans:			

At this point, the school(s) listed on your application have access to your information. The school(s) may put together or change an aid package based on your Expected Family Contribution and notify you.

The amount of aid you receive from a school will depend on the cost of attendance at that school, your enrollment status (full-time, three-quarter-time, half-time, or less than half-time), Congressional appropriations, and other factors. Review your financial aid notification from the school(s) or contact the Financial Aid Administrator at the school(s).

Note: Your school has the authority to request copies of certain financial documents to verify information you reported on your application.

To protect the confidentiality of your application data, you should never give, share, or disclose your FSA ID to anyone, including commercial service providers that provide assistance with the financial aid process. You should keep your FSA ID in a safe location.

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this information collection is 1845-0001. Public reporting burden for this collection of information is estimated to average 5 to 10 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The obligation to respond to this collection is voluntary. If you have comments or concerns regarding the status of your individual submission of this form, please contact the Federal Student Aid Information Center, P.O. Box 84, Washington, D.C. 20044 directly.

We may request additional information from you to process your application more efficiently. We will collect this additional information only as needed and on a voluntary basis.

By answering questions 101a through 101t, and signing the Free Application for Federal Student Aid, you give permission to the U.S. Department of Education to provide information from your application to the college(s) you entered. You also agree that such information is deemed to incorporate by reference the certification statement on the sign and submit page of the financial aid application. The certification statement can be viewed at [StudentAid.gov/2021/help/certification-statement](#).

WARNING: If you are convicted of drug distribution or possession for an offense that occurred while you were receiving Title IV aid, your eligibility for Title IV student financial aid is subject to suspension or termination. If your drug conviction status changes at any time during the 2020-2021 award year, you must update your answer to the drug conviction affecting eligibility question.

Why Nursing?

I was very playful and adventurous as a child, as many children are. Needless to say, I injured myself quite often. Every time I did, my mother or grandmother, who are both Registered Nurses, was there to take care of me. Of all the times I was hurt, I remember them telling me, “everything is alright,” and then how I “needed to be more careful,” but the thing that stuck with me the most was how I felt while they were helping me. I have never felt more comforted than at those moments when they told me everything was going to be alright. Of course, as I grew up, the less sympathetic they became toward my injuries and the more we would laugh about what I had just done to hurt myself. But these memories have sparked my love for nursing. I want to be that sweet comforting face a child sees after they get hurt. I want to be the person to hold someone’s hand to sooth them when they are frightened. I believe everyone deserves to have someone by their side to help them and make them feel safe and secure while they are in a bad situation. I want to make hundreds of people feel just as I felt every time I saw my mother or grandmother come to my rescue.



March 16, 2020

WEST PERRY SCHOOL DISTRICT
HIGH SCHOOL
2608 SHERMANS VALLEY ROAD
ELLIOTTSBURG, PA 17024-9703
717-789-3931

Dear Roberta L. Houpt Scholarship Committee,

I am writing in reference to Sarah Magee. I have had Sarah in Pioneer Club (yearbook) for the past two years. Sarah is a very self-motivated student and always pushes herself to do her best.

Sarah is a very intelligent student, who multi-tasks very well. She has taken AP and Honors courses throughout high school. Sarah is an athlete competing on the Field Hockey and Track & Field teams. She also is active in various clubs including Student Christian Fellowship Club, Community Service Club, Pioneer Club (Yearbook) and is a member of the National Honor Society. She also performs in our school plays and high school musicals. All this while maintaining a part-time job.

Sarah is the editor of our yearbook club. She has been extremely helpful with various activities that we have done in the yearbook room. She handles the stress of meeting deadlines very well. Sarah also is great at interviewing teachers and students for various topics we have covered. She has been successful in going out into the public and speaking to local businesses about donating ads to place in our yearbook. Sarah is always willing to help with anything I need her to do.

I highly recommend Sarah Magee for your scholarship. I have no doubt that she will be as successful in college as she is in high school.

Please contact me with any further questions at csalinetro@westperry.org.

Sincerely,

Chris Salinetro
West Perry High School
Yearbook Adviser

March 11, 2020

Dear Roberta L. Houpt Scholarship Committee,

I am writing in reference to Sarah Magee and her interest in your scholarship. I had Sarah as a student in my Honors Anatomy & Physiology class this past school year. Sarah is a self-motivated student who strives to do her very best in each endeavor and challenge.

She is a bright and hard-working student who uses her time wisely and has learned to manage her time as demonstrated by taking college preparatory and honors courses in history, science and English and AP Literature while juggling her sports schedule and other interests. Through high school she has maintained good academic standing while playing field hockey and track & field. At school she is an active member of Student Christian Fellowship Club, Yearbook Club, Community Service Club, National Honor Society and acts in the school play as well.

In pursuit of her goal, I highly recommend Sarah for consideration for your scholarship. She is a strong, independent student who will certainly excel in the collegiate setting.

If you have any questions or want additional information, please feel free to contact me at jfrey@westperry.org.

Sincerely,

Ms. Jody Frey

West Perry Science Department Chairperson



West Perry High School

2608 Shermans Valley Road
 Elliottsburg, PA 17024
 (717)789-3931
 Fax:(717)789-2146



Student Name: Sarah Magee
 Address: 6 Mill Rd
 Shermans Dale, PA 17090
 DOB: 08/27/2002
 School Code: 391225

COURSE	GRADE	CREDIT	ACADEMIC STANDING	GRADE SCALE		
19-20 West Perry High School			Career GPA (Weighted): 92.86	90-100% = A = 4.0		
First Aid/CPR/Emergency Prep	100	0.50	Career GPA: 91.30	80-89% = B = 3.0		
Probability	87	0.25	Career Credits: 23.250	70-79% = C = 2.0		
Probability	87	0.25	Class Rank: 19 out of 150	60-69% = D = 1.0		
Statistics	88	0.25	Expected Grad Date: June, 2020	0-59% = F = 0.0		
18-19 West Perry High School			TEST RECORDS			
Anatomy and Physiology Honors	93	1.00	<u>SAT 2016+:</u>			
AP® Language and Composition	86	1.00	Date	ERW	Math	Total Score
Concert Band	98	1.00	12/01/2018	520	570	1090
Movement and Dance	100	0.50	05/04/2019	570	540	1110
Pre-Calculus	80	1.00	<u>Keystone Exam Test Scores:</u>			
Spanish III	94	1.00	Exam Name	Date	Score	Performance
Topics in Modern World Hist (Level III)	87	1.00	Algebra	05/27/2016	1510.0	Proficient
Wellness/Fitness (F)	99	0.50	Biology	05/15/2017	1551.0	Advanced
17-18 West Perry High School			Literature	05/15/2017	1556.0	Proficient
Algebra II STEM	83	1.00	ACTIVITIES			
American Literature Honors	89	1.00	<u>ATHLETICS</u>			
Chemistry-Honors	86	1.00	9th Grade: -Field Hockey- -Track & Field-			
Concert Band	98	1.00	10th Grade: -Field Hockey- -Track & Field-			
Driver Ed	98	0.50	11th Grade: -Field Hockey- -Track & Field-			
Spanish II	96	1.00	12th Grade: -Field Hockey- -Track & Field-			
US Hist II-Honors	83	1.00	<u>CLUBS</u>			
Wellness/Fitness (F)	99	0.50	9th Grade: -Yearbook-			
16-17 West Perry High School			10th Grade: -Yearbook-			
Biology I - Honors	85	1.00	11th Grade: -NHS- -Yearbook-			
Concert Band	100	1.00	12th Grade: -NHS- -Yearbook-			
Essentials of Computer Science	97	0.50	<u>OTHER</u>			
Geometry - CP	84	1.00	9th Grade: -Concert Band- -Play Production-			
Algebra IB	95	1.00	10th Grade: -Concert Band- -Play Production-			
Literature II	95	1.00	11th Grade: -Concert Band- -Play Production-			
Spanish I	92	1.00	12th Grade: -Concert Band- -Play Production-			
US History I - CP	93	1.00				
Wellness/Fitness (F)	99	0.50				

Date:

Signature:

Title: Principal



Applicant's Name: _____

HIGH SCHOOL STUDENT INFORMATION SHEET

This page should be completed by your School Counselor.

General Student Information

High School Attended/Attending: _____

High School Address: _____
Street Address

City _____ State _____ Zip _____

H.S. Graduation Date: _____ Cumulative Class Rank: _____

Cumulative GPA: _____ Total H.S. Class Size: _____

Attendance Information

Current School Year: # of Days Absent: _____ # of Days Tardy: _____

Previous School Year: # of Days Absent: _____ # of Days Tardy: _____

Test Scores Information

SAT Reading: _____ Math: _____ Date: _____

Reading: _____ Math: _____ Date: _____

Reading: _____ Math: _____ Date: _____

ACT Composite: _____ Date: _____

Signature Information

The school related information provided above is accurate and true to the best of my knowledge.

High School Counselor Signature: _____ Date: _____

High School Counselor Printed Name: _____

High School Counselor Email Address: _____