



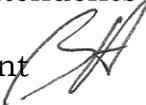
## Wyoming Department of Education

Dr. Jim McBride, Superintendent of Public Instruction  
Hathaway Building, 2nd Floor, 2300 Capitol Avenue  
Cheyenne, WY 82002-0050  
Phone 307-777-7673 Fax 307-777-6234 Website [www.k12.wy.us](http://www.k12.wy.us)

---

### MEMORANDUM NO. 2007- 047

**TO:** School District Superintendents

**FROM:** Bruce Hayes, Consultant 

**DATE:** February 23, 2007

**SUBJECT:** Douvas Memorial Scholarship  
(First Generation American Scholarship)

---

**PLEASE DISSEMINATE TO GUIDANCE COUNSELORS/FINANCIAL AID  
ADVISORS**

### **APPLICATION DEADLINE—APRIL 20, 2007**

Enclosed is a copy of the form to be used by any student meeting the qualifications and desiring to compete for the Douvas Memorial Scholarship. Please feel free to make additional copies to meet your local demand. Also enclosed is a cover sheet outlining general provisions of the scholarship and the procedure to be followed by the applicants.

I would appreciate your efforts in disseminating this information to your high school(s)

Please contact me at 307.777.6198 or [bhayes1@educ.state.wy.us](mailto:bhayes1@educ.state.wy.us) if you have any questions. Thank you.

Enclosures

**Douvas Memorial Scholarship**  
(First Generation American Scholarship)

Details of the Douvas Spring 2007 Application

Peter George Douvas, an immigrant from Greece, outlined in his will that a sum of money be left to the Wyoming Department of Education. The department will use this year's money to establish a \$500.00 scholarship to be awarded to a first generation American youth who demonstrates need and motivation to attend college.

**General Provisions**

The recipient must:

1. Be a first generation American. A first generation American is one born in the United States, but whose parents were not born in the United States.
2. Be a high school senior or between the ages of 18 and 22.
3. Be a resident of Wyoming.
4. Use the scholarship at one of the state's seven community colleges or the University of Wyoming.
5. Use the scholarship to meet educational expenses during the 2007-2008 school year.

**Procedure**

1. The applicant must return the completed application to his or her school's Guidance Office.
2. A counselor or principal must complete the bottom portion of the form and mail the form to:

Bruce Hayes, Consultant  
Douvas Scholarship  
Wyoming Department of Education  
Hathaway Building, 2<sup>nd</sup> Floor  
2300 Capitol Avenue  
Cheyenne, Wyoming 82002-0050

3. A screening/selection committee within the department will make the final selection and notify the recipient and the recipient's high school.
4. The application deadline is April 20, 2007.
5. Recipient notification should take place by May 11, 2007.
6. The warrant will be payable to the recipient and the college in which he or she will enroll. It will be mailed to the college of the recipient's choice in August 2007.

DOUVAS MEMORIAL SCHOLARSHIP  
(FIRST GENERATION AMERICAN)

Form Revised February 2007

Please **TYPE** or **PRINT** in ink.

NAME \_\_\_\_\_  
(Last) (First) (Middle)

ADDRESS \_\_\_\_\_ HOME PHONE NUMBER \_\_\_\_\_

HIGH SCHOOL \_\_\_\_\_ GRADUATION DATE \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ PLACE OF BIRTH \_\_\_\_\_ PRESENT AGE \_\_\_\_\_

FATHER'S NAME \_\_\_\_\_  
FATHER'S PLACE OF BIRTH (COUNTRY) \_\_\_\_\_  
FATHER'S OCCUPATION \_\_\_\_\_  
YEAR FATHER ESTABLISHED RESIDENCY IN THE UNITED STATES \_\_\_\_\_

MOTHER'S NAME \_\_\_\_\_  
MOTHER'S PLACE OF BIRTH (COUNTRY) \_\_\_\_\_  
MOTHER'S OCCUPATION \_\_\_\_\_  
YEAR MOTHER ESTABLISHED RESIDENCY IN THE UNITED STATES \_\_\_\_\_

TOTAL NUMBER IN PARENTS' HOUSEHOLD \_\_\_\_\_  
NUMBER IN SCHOOL BEYOND HIGH SCHOOL, INCLUDING APPLICANT, NEXT YEAR \_\_\_\_\_

IF YOU ARE AWARDED THIS SCHOLARSHIP, WHICH OF THE FOLLOWING ELIGIBLE INSTITUTIONS DO YOU PLAN TO ATTEND? (Check one)

- \_\_\_\_\_ UNIVERSITY OF WYOMING
- \_\_\_\_\_ CASPER COLLEGE
- \_\_\_\_\_ EASTERN WYOMING COLLEGE
- \_\_\_\_\_ NORTHWEST WYOMING COMMUNITY COLLEGE
- \_\_\_\_\_ WESTERN WYOMING COMMUNITY COLLEGE
- \_\_\_\_\_ SHERIDAN COLLEGE
- \_\_\_\_\_ LARAMIE COUNTY COMMUNITY COLLEGE
- \_\_\_\_\_ CENTRAL WYOMING COMMUNITY COLLEGE

WHAT DO YOU PLAN TO STUDY? \_\_\_\_\_

IF YOU ARE CURRENTLY ENROLLED IN COLLEGE OR IN COLLEGE COURSES, PLEASE WRITE A BRIEF DESCRIPTION OF THE PROGRESS YOU HAVE MADE TOWARD A DEGREE OR CERTIFICATE:

DO YOU HAVE A PART-TIME JOB? \_\_\_\_\_ YOUR WEEKLY SALARY? \_\_\_\_\_  
HOW MUCH DO YOU EXPECT TO HAVE SAVED BY NEXT FALL? \_\_\_\_\_  
WILL YOU RECEIVE FINANCIAL ASSISTANCE FROM SOCIAL SECURITY \_\_\_\_\_, VETERANS

ADMINISTRATION \_\_\_\_\_, VOCATIONAL REHABILITATION \_\_\_\_\_, OTHER? \_\_\_\_\_  
IF YOU ANSWERED "YES" TO THE ABOVE QUESTION, HOW MUCH WILL YOU  
RECEIVE? \_\_\_\_\_

HAVE YOU APPLIED FOR ANY OTHER SCHOLARSHIPS? \_\_\_\_\_  
HAVE YOU BEEN AWARDED ANY OTHER SCHOLARSHIPS? \_\_\_\_\_  
IF SO, AMOUNT AWARDED FOR NEXT SCHOOL YEAR \$ \_\_\_\_\_

**CIRCLE** THE FINANCIAL AIDS FOR WHICH YOU HAVE APPLIED: BEOG (Pell Grant);  
Supplemental Educational Opportunity Grant; College Work-Study Program; National Direct  
Student Loan; Youth Opportunity Grant (Minority Students); Guaranteed Student Loan.

HAVE YOUR PARENTS FILED A FINANCIAL AID FORM (FAF)? \_\_\_\_\_

IN THE SPACE BELOW, **PRINT** A *LEGIBLE* SHORT DESCRIPTION OF YOURSELF. INCLUDE  
SUCH THINGS AS ACTIVITIES, HONORS AND AWARDS. ALSO INCLUDE HOW YOU PLAN TO  
FINANCE YOUR EDUCATION, WHY YOU WANT TO CONTINUE YOUR EDUCATION AND WHAT  
UNUSUAL CIRCUMSTANCES EXIST THAT A FINANCIAL AID COMMITTEE SHOULD KNOW  
THAT WOULD MAXIMIZE YOUR CONSIDERATION FOR THIS SCHOLARSHIP. (USE THE  
BACK SIDE IF YOU NEED MORE ROOM.)

Have your current (or latest) school guidance counselor or principal complete the following for  
you.

Applicant ranks \_\_\_\_\_ from the top in a class of \_\_\_\_\_, with a grade average of \_\_\_\_\_  
(A=4 B=3 C=2 D=1 F=0)

ACT Composite percentile \_\_\_\_\_ (if available) SAT percentile V\_\_\_\_\_ M \_\_\_\_\_ (if available)

PSAT/NMSQT percentile V\_\_\_\_\_ M \_\_\_\_\_ (if available)

\_\_\_\_\_  
Signature of Counselor or Principal

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