Tom & Pat Gallagher 2024-25 Scholarship

This scholarship was funded with the generous donations of Thomas L. Gallagher, Jr., and Patricia A. Gallagher. Graduates of Oregon State University, the Gallaghers believe in the value of a liberal arts education and are committed to encouraging students in pursuing a liberal arts education.

One (1) finalist will be awarded a Scholarship in the amount of $2000 for the 2024-25 Academic Year.

Criteria:

● Student must be currently enrolled as undergraduate, sophomore or higher standing, majoring in the College of Liberal Arts.

● Must be in good academic standing and have an overall 3.25 GPA or higher.

● Student must have graduated from a public high school in Oregon.

● Financial need will be considered in the decision process.

A complete application packet includes:

1. Tom & Pat Gallagher Scholarship Application (included).
2. A two(2) page essay explaining why you are pursuing a liberal arts education and what you hope to accomplish after earning your Bachelor’s degree.
3. A completed financial worksheet (included).
4. Two(2) letters of reference and reference forms (included) from OSU Faculty, Professors or Instructors who can attest to your outstanding academic performance.

NOTE: No letters/references from family members, please.

Scholarship application, including letters of reference and reference forms, must be received by 11:59 pm, Wednesday, March 20, 2024. via email with subject line of Gallagher Scholarship to clascholarships@oregonstate.edu.

Please direct any questions to Liz Dexter-Wilson, College of Liberal Arts Scholarship Administrator via email at clascholarships@oregonstate.edu
Tom & Pat Gallagher 2024-25 Scholarship Application

All application materials MUST be received by **11:59 pm, Wednesday, March 20, 2024**.

Name: __________________________________________________________
(Last Name) (First Name) (Middle)

OSU ID Number: ________________________________________________

Major: __________________________________________________________

Minor/Certificate (if any): __________________________________________

First Term at OSU: ___________ / ___________ Term Year

Current Student Level: ____________________________________________

Overall GPA: ____________________________________________________

Anticipated Date of Graduation: __________ / __________ Term Year

Mailing Address: _________________________________________________

Contact Phone No: _______________________________________________

High School Name:____________________________________________________

High School City: ___________________________________________________

OSU email Address:___________________________________________________
Tom & Pat Gallagher 2024-25 Scholarship Application

FERPA Certification/Release Statement:

The Family Educational Rights and Privacy Act (FERPA) of 1974 is a federal law designed to protect the privacy of a student's education records. Education records include all student records. They are considered confidential and will not be released without written consent from the student. In accordance with FERPA, it is necessary for Oregon State University to obtain written consent from the student in order to release any information to the Benton Community Foundation who is the funding source for this scholarship.

By indicating my acceptance of these terms below, I hereby request and authorize the release of information contained in my scholarship application and student education records to the appropriate Oregon State University scholarship selection committees for the purpose of application review and award recipient selection. I further authorize the release of information contained in my scholarship application to the Benton Community Foundation for disbursing the scholarship monies to my student account at Oregon State University.

I understand that this authorization for Oregon State University to use my student education records to assist in the awarding of scholarships will remain valid until I notify Oregon State University in writing that I am revoking this authorization.

I agree with the above statement.

Student name (print)______________________________________________________________

Student signature______________________________________________________________

OSU ID#________________________________________________________________________

Date____________________________________________________________________________
Tom & Pat Gallagher 2024-25 Scholarship

Financial Worksheet

Financial Information

Will you receive any financial aid for the 2024-25 academic year (scholarships, grants, loans)? Yes _________ No _________

Please list the (approximate) amount of funds you will receive for the 2024-25 academic year:

Scholarships/Grants ____________________________________________

Loans ________________________________________________

Please list other financial resources for the 2024-25 academic year: Family/jobs/savings ______________________________________

Other (describe) __________________________________________

Total estimated financial resources: __________________________

Expected Costs for the 2024-25 Academic Year

Tuition/Fees Housing/Rent Health Insurance Books/Supplies

Other Educational Related Costs (Describe):
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

Total Expected Costs: ____________________________________________

Student’s Name: ________________________________________________
Tom & Pat Gallagher 2024-25 Scholarship Reference Page 1

Student’s Name:_______________________________

The student named above is applying to the Tom & Pat Gallagher Scholarship for the 2024-25 Academic Year. This scholarship was funded with the generous donations of Thomas L. Gallagher, Jr., and Patricia A. Gallagher.

Criteria:

● Student must be enrolled as undergraduate, sophomore or higher standing, majoring in the College of Liberal Arts

● Student must be in good academic standing and have a 3.25 GPA or higher

● Student must have graduated from an Oregon public high school

● Financial need will be considered in the decision process

*A complete reference includes the following:

Reference Form

Detailed Letter of Reference

Application Deadline: Wednesday, March 20, 2024, 11:59 pm

Please submit your reference and letter via email to clascholarships@oregonstate.edu

*Applications will not be processed unless the selection committee receives both documents.
Student’s Name: ________________________________

Please rate the applicant on the factors listed below:

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<th>Fair</th>
<th>Average</th>
<th>Good</th>
<th>Excellent</th>
<th>Outstanding</th>
<th>Not Observed</th>
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Interpersonal Skills__________

Academic Skills and Knowledge__________

Motivation and Perseverance ____________

Communication Skills ________________

Responsibility and Self- direction ________

Contribution to Community ____________

Ability to Work with Groups ____________

Attitude________________

Your Contact information:

Print Name_____________________________________________________

Title/Position___________________________________________________

Date__________________________________________________________

Institution_____________________________________________________

Email and Contact Phone Number _________________________________

Signature _____________________________________________________
Tom & Pat Gallagher 2024-25 Scholarship Reference Page 1

Student’s Name ____________________________________________

The student named above has applied for the Tom & Pat Gallagher Scholarship. This scholarship was funded with the generous donations of Thomas L. Gallagher, Jr., and Patricia A. Gallagher.

Criteria:

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Ability to Work with Groups ________________

Attitude______________

Your Contact information:

Print Name__________________________________________

Title/Position__________________________________________

Institution__________________________________________

Date__________________________________________

Email and Contact Phone Number __________________________

Signature__________________________________________