***Greater Killington Women’s Club***

**2025 Pat Zack Community Service Award Application**

The Greater Killington Women’s Club (*formerly Sherburne Women’s Club*) is pleased to announce the **Pat Zack Community Service Award** for the High School Graduating Class of 2025.

**PURPOSE:**

The purpose of the 2025 Pat Zack Community Service Award is to recognize a Killington/

Pittsfield resident high school senior, who demonstrates impressive service and volunteer work during his or her time in high school. The primary selection criterion for this award will be community service. A single **$1000** award will be granted.

**QUALIFICATIONS:**

1. Applicant must be a graduating high school senior.
2. Applicant must be a U.S. Citizen or a permanent resident **and** a resident of Killington or Pittsfield, Vermont, for his/her final two years of high school. Students who attend private high schools are eligible if their primary home is located in Killington or Pittsfield, Vermont, and the above criteria are met.
3. Applicant will be selected according to the following considerations: volunteer work, community service, extracurricular activities, & dedication to others. (*Selection is based on, but not limited to, these criteria*).
4. The primary selection criterion for this Award will be volunteer work/community service.

**SELECTION:**

Applicant: Please make use of the following checklist to ensure that you submit **all of the** **required materials.**

* + A completed Application
	+ A Personal Essay (*see instructions on the following pages*)
	+ Two Recommendation Letters (*give one to a high school official and the other to someone who knows you through your involvement in community service*.)

**APPLICATION INSTRUCTIONS:**

1. Complete and proofread Parts I, II, III and IV of this application.
2. Request Recommendation Letters from both a school official and volunteer manager. Make sure to give them an envelope with your name and address on it. You may then submit the envelope with your application.
3. Submit all parts of the application (*including 2 Recommendation letters*) in a single envelope, postmarked no later than **April 15, 2025**.
4. Award recipients will be notified no later than June 15, 2025.
5. Incomplete or late applications will not be considered.

This Award for a maximum of $1000 is non-renewable and contingent upon the availability of funds.

**For further information, please contact:**

Greater Killington Women’s Club, Attn: Scholarship/Awards Committee

P.O. Box 68, Killington, VT 05751

gkwcvt@gmail.com

***Greater Killington Women’s Club***

**2025 Pat Zack Community Service Award Application**

**Part I – Personal Information**

Applicant's Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 *Last First Middle*

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

 *Month/day/year*

Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 *Street City State Zip*

Phone Number: \_\_(\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

High School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Enrolled: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Expected High School Graduation Date: \_\_\_\_\_\_\_\_

U.S. Citizen: \_\_yes \_\_no U.S. Permanent Resident: \_yes \_no Permanent Residency obtained: \_\_\_\_\_

 *mm/yy*

Resident of Killington, Vermont for final two years of high school: \_\_\_\_yes \_\_\_\_no

Resident of Pittsfield, Vermont for final two years of high school: \_\_\_\_yes \_\_\_\_no

Parent/Guardian Information:

Mother’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Father’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
| **2025 PAT ZACK GREATER KILLINGTON WOMEN'S CLUB COMMUNITY SERVICE AWARD** |
|  |
| **PART II -- Applicant Activity Information** |
|  |
| **Applicant's Name:**  |  |  | **High School:** |  |
|  | **(Last Name)** | **(First Name)** |
|  |
| **ACTIVITIES: In order of their importance to you**, please list your principal extracurricular activities for 9th to 12th grades, including summer. Be as detailed and clear as possible within the format provided. Should you have more activities than space allows, limit it to your most important activities; if fewer activities, leave spaces blank. Do NOT attach a resume or any additional pages. Each activity should be included only once on this page, placed under the category which best describes it. Concise wording and organization are essential. Therefore, we recommend that you first make a photocopy of this page and then complete a rough draft. |
|   |
| **1. COMMUNITY ORGANIZATIONS & SERVICE**  (VOLUNTEER WORK, CHURCH, SCOUTING, 4-H...) |  | 9 | 10 | 11 | 12 |  | HOURS PER WEEK | WEEKS PER YEAR |  | ORGANIZATION DESCRIPTION & PURPOSE | MY ROLE AND CONTRIBUTIONS |
|   |  |  |  |  |  |  |  |  |  |   |  |
|   |  |  |  |  |  |  |  |  |  |   |   |
|   |  |  |  |  |  |  |  |  |  |   |   |
|   |  |  |  |  |  |  |  |  |  |   |   |

APPLICANT'S NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **2. SCHOOL ORGANIZATIONS & CLUBS** |  | 9 | 10 | 11 | 12 |  | HOURS PER WEEK | WEEKS PER YEAR |  | ORGANIZATION DESCRIPTION & PURPOSE | MY ROLE AND CONTRIBUTIONS |
|   |  |  |  |  |  |  |  |  |  |   |   |
|   |  |  |  |  |  |  |  |  |  |   |   |
|   |  |  |  |  |  |  |  |  |  |   |   |
|   |  |  |  |  |  |  |  |  |  |   |   |
| **3. MAJOR AWARDS & HONORS** (SCHOOL & COMMUNITY) |  | 9 | 10 | 11 | 12 |  | **4. OTHER: (**TRAVEL, SPECIAL SUMMER PROGRAMS, HOBBIES…) | TIME COMMITMENT |
|   |  |  |  |  |  |  |  |   |
|   |  |  |  |  |  |  |   |   |
|   |  |  |  |  |  |  |   |   |
|   |  |  |  |  |  |  |   |   |
|   |  |  |  |  |  |  |   |   |
| **5. WORK EXPERIENCE:** TITLE/NATURE OF WORK EMPLOYER |  | 9 | 10 | 11 | 12 |  | HOURS PER WEEK | WEEKS PER YEAR |
|    |  |  |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |  |  |

**Greater Killington Women’s Club**

**2025 Pat Zack Community Service Award Application**

**Part III –Essay Question:**

**“Discuss a significant experience or achievement that has had special meaning to you in your past volunteer work.”**

Essay Instructions:

Your essay should be typed on a separate, single sheet of paper, on one side only. Clearly label the top of the page with your name and high school. Your essay must be single spaced, 12-point font. Be sure to include a title. The Selection Committee hopes your essay will allow us to get to know you in a more personal way and that you will use the question to further articulate your experience and achievements.

**Part IV – Application Deadline and Authorization:**

The Community Service Award Committee must receive all parts of the application, including 2 recommendation letters, in the same envelope, postmarked no later than **April 15, 2025**. Award recipients will be notified no later than **June 15, 2025**. Applications should be mailed to:

**Greater Killington Women’s Club**

**Attn: Scholarship/Awards Committee**

**P.O. Box 68, Killington, VT 05751**

This Award is for a maximum of $1000.00. It is non-renewable and contingent upon the availability of funds. Awards are competitive and will be based on award application information, personal essay and letters of recommendation.

I give permission to GKWC to release this information to other resources.

I certify that all the information on this application and on the supplementary forms is true and complete, and that I have read and understand the instructions.

AUTHORIZATION “In accordance with the application process, I authorize GKWC to obtain from the high school, guidance counselor, teachers, and/or other sources, credentials that may be required with this application including, but not limited to, personal appraisals. I also waive the right of access to the credentials collected, which shall be considered confidential, in accordance with the Family Educational Rights and Privacy Act of 1974. In addition, if I receive this Award, I understand that I will be acting as a representative of the Greater Killington Women’s Club, and in that capacity, I will be expected to conduct myself in a manner that reflects the very highest standards of honesty, integrity, and character. My signature indicates that I understand this obligation and that all information provided is complete, factually correct, and honestly presented”.

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

 **Applicant's Signature Date**

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

 **Parent's/Guardian's Signature Date**