

Heart of Appalachia Talent Search Scholarship Application

Academic Excellence

Minimum of 2.50 Cumulative High School GPA

ACT/SAT Scores-provide a copy of scores

Difficulty of Classes Taken-provide a copy of transcript

Letters of acceptance to post-secondary institutions

Scholarship award notification letters

Copy of FAFSA Student Aid Report-include cover page

Leadership & Community Service

Organizations and Offices Held Awards and Recognition Community Service

Employment Volunteer Work Activities and Honors

Active participant in the Heart of Appalachia Talent Search Program

Essay & Recommendation

Essay - "Describe how the HATS Program has impacted your life and helped you toward achieving your future goals."

Recommendation - Form must be from: a teacher, counselor, principal, former employer or community member.
(*Recommendation can not be from a family member).

Send the completed application to the HATS Program

By mail: HATS Program, One John Marshall Drive, GH 210, Huntington, WV 25755

By email: Scan the completed application as a .pdf and email it to HATS@marshall.edu

Call the HATS program if you have questions or concerns: 304.696.2941

The completed application must be received by **APRIL 24, 2026.**



Heart of Appalachia Talent Search Scholarship Application

- * The HATS Program must receive the complete scholarship application by **APRIL 24, 2026**.
- * The application must be fully completed; incomplete applications will not be considered.
- * A copy of school transcript, all ACT/SAT Test Scores, all letters of acceptance to post-secondary institutions, scholarship award notification letters, and a copy of the student's FAFSA Student Aid Report.
- * The Recommendation form must be completed by a non-family member and returned with this application.

By mail: HATS Program, One John Marshall Drive, GH 210, Huntington, WV 25755

By email: Scan the completed application as a .pdf and email it to HATS@marshall.edu

Call the HATS program if you have questions or concerns: 304.696.2941

Student Information

First Name: _____ Last Name: _____ MI: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Date of Birth: ____/____/____ E-mail: _____

Parent/Guardian Information

Parent/Guardian Name: _____

Level of Education Completed: High School _____ Some College _____ College or Higher _____

Parent/Guardian Name: _____

Level of Education Completed: High School _____ Some College _____ College or Higher _____

Academic Information

High School Cumulative GPA: _____ Composite ACT Score: _____ SAT Score _____

Have you applied for admission to a Post-Secondary School? ____ Yes ____ No

If so, where? _____

Have you been accepted? ____ Yes ____ No (If yes, please provide copies of acceptance letters)

Major Field of Study: _____ Career goal: _____



List the organizations that you have been a member of

Organization

List award(s) or special recognition you have received

Award or Recognition

Years of Membership

[illegible]

Date Received

[illegible]

____ Other Event/Workshop

"Describe how the HATS Program has impacted your life and helped you with achieving your future goals."

I certify that the statements contained in this application are true and complete to the best of my knowledge. I certify that the essay submitted is original and is not under obligation to, or currently being reviewed for consideration by any other entity or individual.

Date _____



Heart of Appalachia Talent Search Scholarship Application

This form should be completed by a professional.
(i.e. teacher, academic counselor, principal, or employer).

Professional Name: _____

School/Business: _____ Work Phone: _____

E-mail Address: _____

How long have you known the applicant? _____

What is your relationship to the student? _____ Teacher _____ Academic Counselor _____ Principal
_____ Employer Other: _____

Rate the scholarship applicant	No Basis for Judgment	Below Average	Average	Excellent
Attitude				
Desire to Succeed				
Leadership				
Integrity				
Community Involvement				
Communication Skills				
Desire/Ability to Overcome Obstacles				

Comments:

Signature: _____ Date: _____

The completed application must be received by **APRIL 24, 2026**.

