



2026 Scholarship Program

The Mike Reese Memorial Fund Announces the Mike Reese Memorial Scholarship Award program. Four scholarships in total will be awarded. \$2500 to one male senior athlete, \$2500 to one female senior athlete, \$1000 to one male senior athlete and \$1000 to one female senior athlete from Mt. Pleasant Area High School planning to pursue any post graduate education.

Scholarship Guidelines:

- Must be a Mt. Pleasant Area High School Graduating Senior
- Must have a minimum GPA of 2.5
- Must be involved in a school sponsored sport
- Must be planning to attend a 4 year university, 2 year community college, any vocation / trade school or any other qualifying career oriented continuing education
- Scholarship funds will be paid directly to the student once the Mike Reese Memorial Fund receives a certificate of enrollment for the fall semester and / or start of program which includes a student ID# and the contact information for the Admissions Office.
- Applications must be received no later than March 31. Applications can be submitted:
 - By mail to:
Mike Reese Memorial Fund
PO Box 225
Norvelt, PA 15674
 - By email to:
mikereesememorialfund@gmail.com
- Applications will be reviewed and the Scholarship will be presented to the winner during the Mount Pleasant Senior Awards Ceremony
- The selection of the winner is solely at the discretion of the Board of Directors of the Mike Reese Memorial Fund.

Please refer any questions to Angela Reese at 724-875-2166



Mike Reese Memorial Fund

Mt. Pleasant Outstanding Student Athlete Scholarship Application

Applicant Information

Full Name: _____ DOB: _____

Parents Full Name: _____

Address: _____ Home Phone: _____

_____ Cell Phone: _____

Email: _____

About You

Are you a current Senior Attending Mount Pleasant Area High School? _____

Cumulative Grade Point Average (GPA) _____

What sports have you played or currently play at Mount Pleasant Area High School?

Sport _____ Years on that team _____ Years Lettered _____

Sport _____ Years on that team _____ Years Lettered _____

Sport _____ Years on that team _____ Years Lettered _____

Sport _____ Years on that team _____ Years Lettered _____

Sport _____ Years on that team _____ Years Lettered _____

Are you involved in any other Extra Curricular activities? Please list

Have you done any volunteer work / community service? Please list

What are your plans after High School?

Tell Us About Yourself

Please choose ONE question below:

1. How have you utilized your talents to assist others in your community?
2. If you had the ability to change one thing about your school and/or the sport(s) you participated in, what would it be, and why?
3. Discuss how you've demonstrated leadership either in-school or within your community.
4. What do you see as your biggest challenge pursuing and graduating from college or technical school? How do you plan to overcome this challenge?

Answer the question using ONE of two methods:

Creative Essay: 500 words or less (feel free to use additional paper to answer)

OR

Creative Video: Record a two minute long video (upload to mikereesemorialfund.com/video when complete)

Please include a copy of your most recent report card and a letter of reference from one coach that impacted your life.

Return application to:

Mike Reese Memorial Fund
PO Box 225
Novelt, PA 15674

STATEMENT OF ACCURACY FOR STUDENTS

I hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge. I also consent, that if chosen as a scholarship winner, my picture may be taken and used to promote the Mike Reese Memorial Fund. (Winner may waive photo due to unusual or compelling circumstances.)

I hereby understand I will not submit this application without all required attachments and supporting information. Incomplete applications or applications that do not meet eligibility criteria will not be considered for this scholarship.

Signature of scholarship applicant: _____ **Date:** _____

STATEMENT OF SUPPORT BY GUIDANCE COUNSELOR

I hereby affirm that this application meets the criteria set forth by this scholarship program and support submission of this application to Mike Reese Memorial Fund.

Name of Guidance Counselor: _____

High School: _____

Contact information (email and phone): _____

Signature of Guidance Counselor: _____ **Date:** _____