

DANIEL HAND HIGH SCHOOL
GUIDANCE AND SCHOOL
COUNSELING DEPARTMENT
2026 SCHOLARSHIP
INFORMATION VERIFICATION

The Women's Club of Madison Scholarship

CONTACT INFORMATION:

Education Department Chair: Melody Wirgau
329 Green Hill Rd., Madison, CT 06443
608-289-1514
mwirgau6@gmail.com
womensclubmadisonct@gmail.com

Amount (2026): \$1000-\$1500

SCHOLARSHIP INFORMATION

Awarded to a high school senior who is pursuing advanced study in the field of visual or performing arts or in the field of education in an accredited course of study up to and including a four-year degree program. Scholarship is based on potential, character, ability, volunteer activities, and arts.

Applicants will come to the School Counseling Office to get/return the Application. We will give you a copy of the applications after March 25th for review and selection..

Name:

Enclosed application is still valid:

Verification Date:

Please return one copy by **mail** or email (hahn.isabelle@madisonps.org) prior to **Wednesday, February 12th**. After that date, we **will** consider the information **listed** above to be accurate and reflective of this year's offering. Thank you once again for your participation in the **DHHS Scholarship** Program.

The Women's Club of Madison Scholarship

A scholarship will be awarded to a high school senior who lives in Madison who is pursuing advanced study in a field of visual or performing arts or in the field of education. The successful candidate will be enrolled in an accredited course of study, up to and including a four-year degree program. This scholarship will be based on career choice, potential, character, ability, and need.

APPLICATION DEADLINE March 31, 2026 at 2:00 p.m.

Applicant's Name:

Applicant's Address:

Applicant's Phone:

Father's Occupation:

Mother's Occupation:

List any other family members that are currently attending college:

Name/College/Tuition

School/Program applicant wishes to attend:

Intended Major:

Tuition **cost** per year:

Please submit the following with your application:

Brief essay telling **us** about **yourself**, your interests, school **you** plan to attend, expected field of study, and reason **you** are applying for this award..

Resume with activities, awards and honors, achievements, and employment, etc.

Unofficial transcript.

Volunteer activities

Sample of your work (copy of artwork, CD of vocal performance, video of acting, etc.)

Two letters of recommendation, one must be from an art/music teacher or instructor.

Parent's statement-brief explaining circumstances that could affect your child's financial needs this coming year.

I give DHHS permission to submit an unofficial transcript on my behalf:

Signature:

Date:

Please return this completed application to the Counseling Office by March 31st at 2:00 pm.