



# **The Ritton Family Foundation**

**2026 Scholarship Application**

## **The Scholarship Program**

The Ritton Family Foundation and Par Mar Stores are proud to offer a scholarship program designed to assist students in our communities. The Foundation provides multiple scholarships to high schools seniors, graduates and college undergraduates enrolled in a full-time course of study at a college, university or trade school.

### **Eligibility**

Anyone who resides in Pennsylvania, Ohio, West Virginia, Maryland or Kentucky is eligible.

### **Awards**

The Foundation will award multiple scholarships for one full year of study. Students may re-apply to the program each year that they meet eligibility requirements.

### **Selection of Recipients**

Scholarship recipients are selected on the basis of academic record, community involvement, school activities, honors, work experience, statement of career goals and financial need.

### **Applications**

Applications must be received by **April 15th** to be considered. Awards will be announced in late May.

### **Selection**

The Foundation's scholarship committee will select the recipients.

### **Payment of Scholarship**

The Foundation will issue scholarship awards to the recipient. Checks will be mailed to the recipient's home address and will be made payable, jointly, to the recipient and the school. The check must be endorsed by both the recipient and the school.

### **Questions?**

Please contact Nichole Evans at 740-236-4032 or email [nevans@parmarstores.com](mailto:nevans@parmarstores.com)

# Application for Scholarship

## I. Applicant Data

Full Name \_\_\_\_\_  
(Last) (First) (Middle)  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home Number \_\_\_\_\_ Cell Number \_\_\_\_\_  
Age \_\_\_\_\_ Date of Birth \_\_\_\_\_

## II. Parent or Guardian Information

Full Name \_\_\_\_\_  
(Last) (First) (Middle)  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home Number \_\_\_\_\_ Cell Number \_\_\_\_\_  
Do we have your permission to share your scholarship data with the person listed above? \_\_\_\_\_

## III. High School Information

School Name \_\_\_\_\_ Telephone \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
GPA \_\_\_\_\_ Expected Graduation Date (MM/YYYY): \_\_\_\_\_  
Guidance Counselor \_\_\_\_\_ Telephone \_\_\_\_\_

Have you applied for Pell Grant or other financial aid? \_\_\_\_\_

What is your FAFSA Need Index (SAI)? \_\_\_\_\_

#### IV. Post Secondary School Data

Official school name(s) of post-secondary school(s) you plan to attend next year.

If unknown, list (in order of preference) the schools to which you have applied:

\_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

\_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Student will: ☐ Live on Campus ☐ Live off campus ☐ Commute from home

Major or Course of Study \_\_\_\_\_

Expected Graduation Date (MM/YYYY): \_\_\_\_\_

If currently attending college, what is your GPA ? \_\_\_\_\_ (attach documentation)

College or University currently attending: \_\_\_\_\_

#### V. Activities, Awards, Honors

List all school activities in which you have participated during the last four years (e.g. student government, music, sports, etc.) List all community activities in which you have participated in the last four years without pay (e.g. hospital volunteer, library volunteer, Boy/Girl Scouts, Special Olympics). Indicate all honors, offices held and special awards.

Activity	# Years Participated	Awards/Honors	Office Held
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

#### VI. Work Experience

Employer	Dates Employed	Brief Description of Duties
_____	_____	_____
_____	_____	_____
_____	_____	_____

## VII. References

List three references with at least one being a teacher at your current school.

Name	Occupation	Address	Phone
------	------------	---------	-------


Are you a Par Mar Stores employee or related to an employee? If yes, please provide employee name and describe the relationship\_\_\_\_\_

## VII. Challenges and Resilience

Please describe a personal challenge that you have faced and discuss how it influenced your life. Use additional sheets of paper if necessary.


**Mail (or email) completed applications to the Ritton Family Foundation:**

114-A Westview Avenue, Marietta, OH 45750

nevans@parmarstores.com

**Applications must be in the possession of the Foundation by April 15th, 2026 to be considered.**

