

Clinton County Community Foundation



CLARENCE COCHRAN AGRICULTURAL SCHOLARSHIP Application Form

- For qualified students graduating from *Clinton Central or Clinton Prairie High Schools* who are or will be attending *any qualifying higher education institution*, who are pursuing an education in agriculture or another vocation-related field, who are deserving of financial assistance, and who are likely to succeed as *post-secondary, trade, vocational, college, or university* students.
- The scholarship recipients will be determined based on *need, academic achievement, and without regard to race, gender, religion or religious affiliation*.
- The scholarship award(s) shall be made based on the following:
 - (1) **Good character;**
 - (2) **Good citizenship;**
 - (3) **Good scholastic record;**
 - (4) **Recommendation from the principal, teacher, or faculty advisor of the high school with respect to the nominated student;**
 - (5) **Financial need;**
 - (6) **Healthy life style;**

Please complete and return this form to:

Clinton County Community Foundation
Attn: Clarence Cochran Agricultural Scholarship Committee
215 W. Sycamore St.
Kokomo, IN 46901

Application must be in our office by March 23, 2012.

If you have questions, you may contact the Foundation office by phone at:
(800) 964-0508 or e-mail kim@cfcClinton.org
Web Site: www.cfcClinton.org

(PLEASE TYPE OR PRINT THE FOLLOWING DATA)

Personal Profile

Name _____ Date of Birth ____ / ____ / ____

Address _____

Street City State Zip

Phone (____) _____ E-mail Address _____ Cell Phone (____) _____

Father/stepfather/guardian _____

Employer _____ Position _____

Address if different from student's _____

Mother/stepmother/guardian _____

Employer _____ Position _____

Address if different from student's _____

If applicable, please complete the following:

Spouse _____ Number of Children _____

Employer _____ Position _____

Family Information

Number of brothers and sisters: Younger: _____ Older (If dependent) _____

Ages of brothers and sisters: _____

Number (including self) in post-high school education next year: _____

Financial Data for 2011

Student's Income _____ Mother's Income _____ Father's Income _____

If applicable: Stepfather's Income _____ Stepmother's Income _____

If additional questions should arise with regard to the financial data requested, the foundation reserves the right to request for review a copy of the most recent tax return filed by the applicant, or the applicant's parents, if dependent.

Estimated Financial Resources: (List any other financial assistance being received in the form of grants, scholarships and/or loans. Please indicate if these awards are one-time or renewable awards.)

Type of Assistance	Source	Amount

Are you a 21st Century Scholar? ___ Yes ___ No

Do you prefer to attend a private college or university? _____

Please report any unusual family/personal/financial circumstances you want the committee to consider:

Name of College and/or University (s) to which you plan to attend: _____

Intended major course of study: _____

Scholastic Profile

High School Name _____

Applicant Ranks _____ in a class of _____ SAT/ACT _____

Cumulative Grade Point Average _____ (4.0 scale)

School Official _____

Title _____ Date _____

Signature _____ Phone _____

(PLEASE TYPE OR PRINT THE FOLLOWING DATA)

Work experience - List places of employment over last 4 years. (Attach another paper if needed.)

Company	From/To	Hours Per Week	Amount Earned
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Extracurricular Activities/Community Involvement - List all school, community, civic and church related activities you have participated in during past 4 years: (Attach another paper if needed.)

Activity	# of years	Activity	# of years
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Awards & Honors - List all awards and honors you have received (school & otherwise) during the last 4 years. (Attach another paper if needed.)

Goals and Aspirations (type or print) (Attach another paper if needed.)

Describe your personal and educational goals including plans for your career and your future.

Application Checklist

This application for a scholarship becomes complete and valid only when completed in its entirety with all required attachments:

- Student application
- Transcript of grades
- Recommendation on your behalf by no more than three individuals. These individuals must be someone other than a relative. At least one of the recommendations should be from a school faculty member/administrator.

Mail or deliver to:

Clinton County Community Foundation
Attn: Clarence Cochran Agricultural Scholarship Committee
215 W. Sycamore St.
Kokomo, IN 46901

Certification

In submitting this application I certify that the information provided is complete and accurate to the best of my knowledge. Falsification of information may result in termination of any scholarship granted.

Applicant's signature: _____

Date: _____

Eligibility Requirements: A child, step-child, grandchild, step-grandchild, great grandchild, step-great grandchild, spouse, brother, sister, and spouses of everyone listed previously of someone who during the last five years has served as a member of the Clarence Cochran Agricultural Scholarship Committee and/or been a Board Member or a regular full-time and/or regular part-time employee of the Clinton County Community Foundation is not eligible for the Clarence Cochran Agricultural Scholarship awarded by the Community Foundation.