

Clinton County Community Foundation

*Serving the donors of Howard,
Clinton and Carroll Counties*

2012

Vern & Lillian Kaspar Scholarship Application Form



of Clinton County

Please complete and return this form to:

Clinton County Community Foundation
Attn: Vern and Lillian Kaspar Scholarship
215 W. Sycamore Street.
Kokomo, IN 46901

Application must be received by March 23, 2012

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

(PLEASE TYPE OR PRINT THE FOLLOWING DATA)

Personal Profile

Name _____

Mailing Address _____

City _____ State _____ Zip _____ Phone (____) _____

Date of Birth _____ E-mail address _____ Cell Phone (____) _____
MM/DD/YYYY

Father/Guardian Name _____

Employer _____ Position _____

Address if different from student's _____

Mother/Guardian Name _____

Employer _____ Position _____

Address if different from student's _____

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

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

Name School(s) to which you have applied and circle those to which you have been accepted:

Major course of study: _____

Scholastic Profile

High School Name _____

Address _____

City _____ State _____ Zip _____ Graduation Date: Month _____ Year _____

Applicant Ranks _____ in a class of _____ SAT/ACT (math + verbal) _____ written _____

Cumulative Grade Point Average _____ (4.0 scale)

School Official _____

Signature _____ Date _____

Title _____ Phone (____) _____

Extracurricular Activities - List all school related activities you have participated in over past 4 years:

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

Awards & Honors - List all awards and honors you have received (school & otherwise) the last 4 years.

Work experience - List places of employment over last 4 years.

Company From/To Hours Per Week Amount Earned

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:

Goals and Aspirations (type or print in 50 words or less, use separate sheet if necessary)

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

Recommendations

Please enclose no more than 3 letters of recommendation from someone other than a relative.

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
- [] Letters of Recommendation from principal, teacher, or faculty advisor of the high school with respect to the student.
- [] First year applicants must submit a copy of acceptance letter from their post-secondary school.

Forward to: Clinton County Community Foundation
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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: _____