

Clinton County Community Foundation

2012

Michigantown H.S. Alumni Association Scholarship Application Form

- For qualified, graduating students residing in Michigan Township or Warren Township, Clinton County, Ind., who will be enrolled in a full-time course of study at an accredited two- or four-year college, university or vocational-technical school. Full-time study is defined as 12 or more hours (or the equivalent) in each academic semester with two semesters per year.
- The scholarship is awarded after the successful completion of the student's first semester in a post-secondary educational program. The scholarship recipient will mail their first semester grades and indication of their intent to continue in post-secondary education: (class schedule, billing, and/or proof of registration for second semester) to the Clinton County Community Foundation.
 - (1) Academic record;
 - (2) Demonstrated leadership and participation in school and/or community activities;
 - (3) Honors;
 - (4) Goals and aspiration statement in application;
 - (5) Financial need;
 - (6) Unusual or family circumstances will be considered
 - (7) Three letters of recommendation with respect to the nominated student.



of Clinton County

Please complete and return this form to:

Clinton County Community Foundation
Attn: Michigantown H.S. Alumni Association 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 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 _____ Township _____

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
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Recommendations

Please enclose three letters of recommendation with respect to the nominated student (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
Attn: Michigantown H.S. Alumni Association Scholarship
215 W. Sycamore Street
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: _____