Dear Scholarship Applicant:

Attached you will find the application for the West Geauga Kiwanis Club's Scholarship Award. The Kiwanis Club will award scholarships of varying amounts to the students judged to be the most deserving. It is very important that you fill out your application **in its entirety**, include the requested letters of recommendation, and your most recent transcript.

QUALIFICATIONS:

Applicants must be (have been) a permanent resident in the West Geauga School District at the time of their high school graduation. You can only apply once.

Applicants must have plans to continue their education full-time at a college, university, or accredited vocational institution during the fall of the year the award is received.

Applications must be complete. Please make sure you include at least 3 letters of recommendation for categories B, C, D, & F (employers, counselors, coaches, teachers, etc). See application for details.

Applicants will be graded on their completed application and information obtained by the judges at the personal interview.

APPLICATION DEADLINE IS MARCH 25, 2014.

(Please Note: Applications received after the deadline will not be accepted)

All Interviews will be conducted on Sunday, April 6, 2014 at the Geauga West Library beginning at 1:00 PM. Applicants will be notified of their interview time prior to the interview date.

The Scholarship Awards will be presented on a Tuesday in early May 2014 at the West Geauga Kiwanis Club's weekly meeting which begins at 7:00 pm.

Completed applications are to be mailed to the following address:

Andrea Milnar Scholarship Chairman 8312 Sharp Lane Chesterland, OH 44026

WEST GEAUGA KIWANIS CLUB SCHOLARSHIP APPLICATION

Eligibility for this award is limited to those students who are (were) permanent residents within the West Geauga Kiwanis Service area (West Geauga School District) at the time of their high school graduation. Scholarships are available to qualified high school graduates within two (2) years of graduation. You can only apply for this scholarship once.

Scholarship recipients must have plans to continue their education full-time at a college, university, or accredited vocational institution during the fall of the year the award is received. Applications will be based on academic grades, leadership qualities, school related activities, community involvement, self improvement, financial need, and personal character.

STUDENT INFORMATION

NAME:		_ AGE:	SEX:
ADDRESS:			
PHONE #:	EMAIL:		
HIGH SCHOOL:			
CAREER INTEREST:			
FAMILY INFORMATION			
FATHER'S NAME:			
ADDRESS:			
OCCUPATION:			
MOTHER'S NAME:			_
ADDRESS:			_
OCCUPATION:			_
NUMBER OF CHILDREN IN Y	OUR FAMILY: _		
NUMBER OF CHILDREN CUR	RENTLY IN COI	LLEGE:	
	Y	EAR(S):	

APPLICANT ACTIVITY

А.	SCHOLARSHIP: Cumulative Grade Point Average Maximum Points	
	Number of Students in Your Class Class Rank	
	PLEASE INCLUDE YOUR MOST RECENT TRANSCRIPT.	

B. ACTIVE COMMUNITY SERVICE AND NUMBER OF YEARS INVOLVED:

C. LEADERSHIP (CLASS OFFICER, CLUB OFFICER, TEAM CAPTAIN, ETC.):

D. EXTRA CURRICULAR SCHOOL ACTIVITIES AND YEARS INVOLVED:

E. AWARDS OR RECOGNITION RECEIVED:

F. PART-TIME EMPLOYMENT (PLEASE INCLUDE RESPONSIBILITIES):

G. SCHOLARSHIPS OR OTHER FINANCIAL AID APPLIED FOR AND/OR RECEIVED:

H. INCLUDE A LETTER EXPLAINING WHY YOU FEEL YOU SHOULD BE CONSIDERED FOR THIS AWARD. STATE YOUR GOALS AND DESCRIBE ANY SPECIAL CIRCUMSTANCES THAT YOU FEEL SHOULD BE CONSIDERED BY THE SCHOLARSHIP COMMITTEE.

NOTE:

B, C, D, & F – Minimum requirement of 3 letters of recommendation is required from any of these categories (advisor, teacher, coach, and/or supervisor).

*If additional space is required for the questions listed above, please use the back of this page or an additional sheet of paper.