



Office Use Only

Date Received _____

DOLLARS FOR SCHOLARS SCHOLARSHIP COVER LETTER

This form **MUST** be returned to Student Services by **3:00 PM on March 1, 2010**.

I. Eligibility for “Dollars For Scholars” Scholarship

A Shawano Community High School graduating senior student that has applied to any post-secondary institution is eligible to apply for this scholarship. The Dollars For Scholars scholarship committee does not discriminate based on gender, race, national origin, ancestry, creed, sexual orientation, or physical, mental, emotional, or learning disability.

II. How To Apply

Eligible students can apply for all scholarships through a single application form. The application forms are scored anonymously by “Dollars For Scholars” Distribution Awards Committee. **Incomplete and/or late applications will be disqualified. Please ask your counselor for assistance if you are unclear about anything.**

III. Scholarship Value

Dollars For Scholars will be presenting scholarships based on merit only and merit/financial need. The scholarship amounts vary from year to year. The scholarship will be paid after completion of the 1st semester. The student will have to provide proof of completion of the 1st semester and proof of continued enrollment. Students will only have one year to claim the scholarship.

IV. Criteria For Scholarships

Merit Criteria:

a. Personal data	Max 80 points
b. Application Appraisal	Max 40 points
c. Converted Rank in Class	Max 80 points
d. English Test Score (ACT)	Max 20 points
e. Math Test Score (ACT)	<u>Max 20 points</u>
Total	240 points

Merit/financial need Criteria:

a. Personal data	Max 80 points
b. Application Appraisal	Max 40 points
c. Converted Rank in Class	Max 80 points
d. English Test Score (ACT)	Max 20 points
e. Math Test Score (ACT)	Max 20 points
f. Financial Need	<u>Max 160 points</u>
Total	400 points



DOLLARS FOR SCHOLARS SCHOLARSHIP APPLICATION FORM

Name _____ Student ID # _____

Address: _____
Street City State Zip

Parent's Name _____ Phone _____

I am applying for a scholarship based on _____ merit only _____ merit and financial need

Teacher Appraisal

Please detach the last page of this application and give them to a teacher that knows you well. Use the line below to record the teacher you gave your appraisal form to and the date.

Certification of Signatures (all applicants must complete this section)

Certification: All information provided is complete and accurate to the best of my (our) knowledge. If asked by a Dollars For Scholars board member, I (we) agree to provide additional proof of information that I (we) have stated on this form.

Applicant Signature

Date

Parent Signature

Date

Financial Need Verification (Only applicants applying for scholarship based on financial need and merit need to complete this section)

I (we) agree to provide proof of information that I (we) have stated on this form by [attaching a signed copy of my \(our\) 2009 U.S. income tax return \(1040 or 1040A\) with this application](#). I (we) realize that if I (we) do not provide proof at this time, the student will be ineligible to receive the merit and financial need based award. Students will still be considered utilizing merit based information only. All information provided will be destroyed following the selection process.

Applicant Signature

Date

Parent Signature

Date



Student ID # _____

Financial Assistance Questionnaire

****Important** Only complete this form if you are applying for the financial need and merit based scholarship.**

1. Parents should complete this section using their own financial information.

DO NOT COMPLETE THIS SECTION WITH STUDENT INFORMATION.

2. Prior to the scholarship committee evaluation, information from tax returns will be verified and reviewed separately by a school administrator and then the tax return will be destroyed.
3. All financial information submitted on this form will be held confidential. This information is seen only by the DFS scholarship committee.

A. Income, expense, and asset data

For the year of January 1, 2009 to December 31, 2009

1.	Adjusted gross income (line 37 Form 1040, line 21 Form 1040A)	\$
2.	Total U.S. income tax paid (line 60 Form 1040, line 37 Form 1040A)	\$
3.	Income earned from work by father or step-father by mother or step-mother	\$
4.	The addition of these two incomes should equal line 7 on Form 1040 or 1040A.	\$
5.	Untaxed income/benefits (Social Security, AFDC, ADC)	\$
6.	Medical expenses not paid by insurance	\$
7.	Cash, savings, bonds, stock, checking account, CD's, notes, etc...	\$
8.	Total number of exemptions (line 6d on Form 1040 or 1040A)	

B. Additional Information

Parent's current marital status is:

_____single _____married _____widowed _____separated _____divorced

Total number of family members who will be attending a post-secondary school at least halftime during the 2010-2011 school year (including applicant). _____



Student ID # _____

List all school activities in which you have been involved in during the past 4 years (e.g. student council, music, sports, etc.). List all community activities in which you have participated without pay during the last 4 years (e.g. Red Cross, church work, volunteer work). Indicate all special awards, honors. (Attach an additional sheet for more information.)

Activity	Years	Special Awards, Honors	Activity	Years	Special Awards, Honors

Make a statement of your plans as they relate to your education & career objectives and goals. (Attach an additional sheet for more information.)

Please report any unusual family or personal circumstances you feel warrant attention. (Attach an additional sheet for more information.)

TEST INFORMATION

ACT Standard Score _____ English _____ Math _____ Composite

TRANSCRIPT INFORMATION

Have the following section completed by the Student Service Office Secretary when you return the completed form. Transcript information from the end of your 7th term will be documented.

Applicant Ranks _____ of _____
Cumulative grade point average _____

School Personnel's Signature



Student Name: _____

Student ID # _____

You have been asked to provide information in support of this student's application for a scholarship. Please give thoughtful consideration to the following statements.

This form must be turned in to Student Services by March 1, 2010. Do not return to applicant.

The applicant's choice of a post secondary education program is...	Extremely Appropriate	Very Appropriate	Moderately Appropriate	Inappropriate
The applicant's achievements reflect his/her ability...	Extremely Well	Very well	Moderately well	Not well
The applicant's ability to set realistic and attainable goals is...	Excellent	Good	Fair	Poor
The quality of the applicant's commitment to school and community is...	Excellent	Good	Fair	Poor
The applicant is able to seek, find and use learning resources...	Extremely Well	Very well	Moderately well	Not well
The applicant demonstrates curiosity and initiative...	Extremely Well	Very well	Moderately well	Not well
The applicant demonstrates good problem solving skills, follows through and completes tasks...	Extremely Well	Very well	Moderately well	Not well
The applicant's respect for self and others is...	Excellent	Good	Fair	Poor

Comments:

(Please do not use student's name.)

 Teacher's Signature

 Date