Shiawassee

community foundation



MARGARET E. DITTENBER MEMORIAL SCHOLARSHIP FUND APPLICATION

DUE MARCH 09, 2018 @ 4:00 P.M. EST

CRITERIA

- AuGres Sims High School Seniors
- Seeking a career in education
- Plans to attend a two/four year accredited college
- Possess a grade point average adequate to predict successful completion of a degree program
- Students with financial need will be given priority
- Candidates should not be receiving numerous other scholarships

HOW TO APPLY FOR THIS SCHOLARSHIP:

In order to be considered for this scholarship, all six of the following requirements must be complete and submitted to the Foundation Office by the March 09, 2018, 4:00 p.m. EST deadline. Applications that are received after the deadline or are not entirely complete will not be considered (no exceptions). Please submit the following information (in this order):

- Both pages of the scholarship application must be filled out completely. Make sure your application is either
 typed or legibly printed using blue or black ink. Applicants must use this year's scholarship application form in order to
 be considered.
- 2) A one page personal essay is required. The essay should be typed (font size no larger than 12) and double-spaced. The essay should state your personal and educational goals for your career and your future. Include details about yourself so the selection committee members can get to know who you are and why you should be selected for a scholarship.
- 3) A typed current resume is required. A sample resume is included on the last page of this packet and can be used as a guide to help create your own.
- 4) Two signed and dated letters of recommendation from two different individuals are required. These letters must be dated within the past year and be signed by the person writing the letter. These letters can be from your school administrators/educators or adult members of the community (not family members).
- 5) Most recent high school official transcript of grades is required. The transcript must be sent directly to the Foundation Office from your guidance counselor or school official by the due date. Please give the school office at least one week to process this request. It is the responsibility of the student to request the transcript and make sure it is received at the Foundation office by the due date. Scholarship applications will not be considered without official transcripts.
- 6) A copy of your Free Application for Federal Student Aid (FAFSA) form or your family's most recent income tax return is required. Because financial need is an important factor in some of our scholarships, the Community Foundation looked for an objective way to assess need among applicants with a variety of family financial situations. Please submit the page(s) from your FAFSA showing parents'/student's adjusted gross income or your most recent income tax return that includes your family adjusted gross income. The application form also includes a section to describe any unusual financial circumstances in your household.

If you have any questions, please feel free to contact us at 989-725-1093

or lisa@shiacf.org

SUBMIT YOUR APPLICATION(S) AND THE REQUIRED ATTACHMENTS BY THE DUE DATE TO:

By Mail: Shiawassee Community Foundation
Post Office Box 753
Owosso, MI, 48867
In Person: Shiawassee Community Foundation
217 N. Washington St. – Suite 104
Owosso, MI 48867

Please do not put applications and attachments in a binder or staple them together. Each application and required attachments should simply by paper clipped together in the same order as listed above.

SHIAWASSEE COMMUNITY FOUNDATION SCHOLARSHIP AWARD POLICIES:

- Shiawassee Community Foundation Staff, Board, and Selection Committee members and their relatives are not eligible to apply for scholarships with the exception of the SCF Youth Advisory Council Board members. Youth Advisory Council Board members abstain from the entire scholarship selection and award process. (The term "relatives" is defined as parent, child, stepparent, stepchild, grandparent, grandchild, aunt, uncle, nephew, niece, first cousin, or sibling.)
- The Shiawassee Community Foundation Board of Directors reserves the right to extend any and all scholarship deadlines and to not award any and all scholarships at their discretion.
- Completing and submitting a scholarship application does not guarantee a scholarship award.
- All scholarship awards are made on an objective and nondiscriminatory basis from a pool of persons based on the criteria of each scholarship fund and upon the qualifications provided to SCF by the applicant.
- Alternate recipients may be selected for scholarships in the event the chosen recipient becomes ineligible.
- SCF is not responsible for applications or required documentation that is delayed or lost in the mail. Late and/or incomplete applications will not be considered for a scholarship.
- Scholarship monies are to be used within a year of being approved by the SCF Board.
- * All scholarship application information submitted to SCF is handled in a strictly confidential manner.
- Scholarship amounts for each fund vary from year to year as determined by the SCF Board of Directors.
- Scholarships that are refunded to the Foundation from a grantee institution will be deposited back into the scholarship fund. Reissuance of a refunded scholarship is at the discretion of the Shiawassee Community Foundation.
- Scholarships are awarded based on the criteria of the scholarship fund and the information provided to SCF on the scholarship application of each student. If any information provided to SCF on the scholarship application changes and the student is no longer eligible to receive the scholarship awarded to them, then the scholarship will be rescinded.

MARGARET E. DITTENBER MEMORIAL SCHOLARSHIP APPLICATION FORM (2018)

Street Address:	State: Zip: Graduation Year: R ACT Score: warded from other institutions. Do no
Home Phone: Cell Phone: Email Address: High School: SAT Score: OR Date of Birth: Male Female Please list any other scholarships that you have applied for or have been averaged the scholarships you are applying for through the Shiawassee Compuse additional sheets if necessary.	Graduation Year: R ACT Score: warded from other institutions. Do no
Email Address: High School: Cumulative GPA: Date of Birth: Please list any other scholarships that you have applied for or have been awanclude the scholarships you are applying for through the Shiawassee Compuse additional sheets if necessary.	Graduation Year: R ACT Score: warded from other institutions. Do no
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Name of Institution and amount awarded (if known)	
COLLEGE/UNIVERSITY INFORMATION	
ist colleges or trade schools, in order of preference, to which you have app	olied or are attending:
Acc	cepted Application Pending
2 Acc	cepted Application Pending
3 Acc	cepted Application Pending
Area of Study:	
Full Time Student? Yes No If no, # of credits per sen	

FAMIL'	Y INFORMATION					
Name of Parents/Guardians: Father's Employment:						
Number of family members in college as of the fall 2015 semester:						
		nclude the page of your FAFSA application s at recent income tax return page that shows				
A.	Have you filled out the Free	Application for Federal Student Aid (FAFSA)?	Yes	No		
В.	B. Total family income (adjusted gross income from most recent tax return) (check one):					
	Below \$20,000	\$20,000 to \$40,000	\$40,000 t	to \$60,000		
	\$60,000 to \$80,000	\$80,000 to \$100,000	Over \$10	0,000		
In cons scholar 1. 2. 3. 4. 5.	ship terms and conditions as That all information provide If selected for a scholarship Permission is given to the reports, press releases or o To notify the Shiawassee O this scholarship. I am not a member or a rel Committee with the except I understand that completing	olarship (if awarded), the undersigned hereby a collows: to the Shiawassee Community Foundation is the educational institution will receive a check niawassee Community Foundation to use my plotheir website to publicize their philanthropic efformunity Foundation in the event of my voluntative of the Shiawassee Community Foundation of Youth Advisory Council Board members. a scholarship application does not guarantee a covided in this application is accurate and complexity.	rue and accura on my behalf. hoto(s) in broc forts. ary or involunta s Staff, Board a scholarship a	hures, annual ary withdrawal of or Selection		
Applica	nt Signature	 Date Signed				

SAMPLE SCHOLARSHIP APPLICATION RESUME

Name Address City, State, Zip Phone Number Email Current Date

College Plans

Include the name of the college or trade school you plan on attending and what you plan on studying.

Education Experience

Include the name of your high school and college (if you have taken college courses). Also, include any additional educational experience that you have.

Academic/Scholastic Activities

Include your activities in clubs, student government, National Honor Society, etc.

Sporting Activities

Include your involvement in sports

Extracurricular and Community Activities

Include civic activities, clubs, volunteers work, etc.

Leadership Positions

Include number of years you have participated in these activities and your leadership position, letters earned, awards received and recognitions

Work Experience

Include the name of employer, nature of work, positions held and dates employed