

Shiawassee

community foundationSM



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):

- 1) **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

MARGARET E. DITTENBER MEMORIAL SCHOLARSHIP APPLICATION FORM (2018)

Student Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

High School: _____ Graduation Year: _____

Cumulative GPA: _____ SAT Score: _____ OR ACT Score: _____

Date of Birth: _____ Male _____ Female _____

Please list any other scholarships that you have applied for or have been awarded from other institutions. Do not include the scholarships you are applying for through the Shiawassee Community Foundation. Please feel free to use additional sheets if necessary.

Name of Institution and amount awarded (if known)

Name of Institution and amount awarded (if known)

COLLEGE/UNIVERSITY INFORMATION

List colleges or trade schools, in order of preference, to which you have applied or are attending:

1. _____ Accepted _____ Application Pending _____

2. _____ Accepted _____ Application Pending _____

3. _____ Accepted _____ Application Pending _____

Area of Study: _____

Full Time Student? Yes _____ No _____ If no, # of credits per semester: _____

Where do you plan to live? On Campus _____ With parent _____ Other _____

FAMILY INFORMATION

Name of Parents/Guardians: _____

Father's Employment: _____

Mother's Employment: _____

Number of family members in college as of the fall 2015 semester: _____

FINANCIAL INFORMATION Also include the page of your FAFSA application showing parent (or student) adjusted gross income or your most recent income tax return page that shows the adjusted gross income.

A. Have you filled out the Free Application for Federal Student Aid (FAFSA)? Yes____ No____

B. Total family income (adjusted gross income from most recent tax return) (check one):

_____ Below \$20,000 _____ \$20,000 to \$40,000 _____ \$40,000 to \$60,000

_____ \$60,000 to \$80,000 _____ \$80,000 to \$100,000 _____ Over \$100,000

Please describe any unusual financial circumstances in your household (please use an additional page if necessary):

CERTIFICATION

In consideration for receipt of this scholarship (if awarded), the undersigned hereby agrees to the acceptance of the scholarship terms and conditions as follows:

1. That all information provided to the Shiawassee Community Foundation is true and accurate.
2. If selected for a scholarship, the educational institution will receive a check on my behalf.
3. Permission is given to the Shiawassee Community Foundation to use my photo(s) in brochures, annual reports, press releases or on their website to publicize their philanthropic efforts.
4. To notify the Shiawassee Community Foundation in the event of my voluntary or involuntary withdrawal of this scholarship.
5. I am not a member or a relative of the Shiawassee Community Foundation's Staff, Board or Selection Committee with the exception of Youth Advisory Council Board members.
6. I understand that completing a scholarship application does not guarantee a scholarship award.

I hereby affirm that the information provided in this application is accurate and complete to the best of my knowledge.

Applicant 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