



Kiwaniis[®]

SERVING THE CHILDREN OF THE WORLD

**Gilmer Kiwanis
P.O. Box 126
Gilmer, TX 75644**

Office: (903) 680-2800

Fax: (855) 798-9890

APPLICATION FOR COLLEGE SCHOLARSHIP KIWANIS CLUB OF GILMER, TEXAS

GUIDELINES FOR SCHOLARSHIP RECIPIENT

1. To be eligible for the **first half** of the scholarship (not less than \$250), the recipient must present proof of registration for the courses along with the hours that the scholarship will apply towards. Please email to: ljohnson@urecc.com or mail to the address below.
2. To be eligible for the **second half** of the scholarship (not less than \$250), the recipient shall present proof of registration for the courses and hours that the scholarship will apply towards along with their grades for the previous semester's courses and hours.
3. To be eligible for the second half of the scholarship, you must maintain no less than a 3.0 grade point average.
4. You must be classified as a full time student in good standing (minimum of 12 college hours).
5. All scholarship monies will be paid directly to the college or university of your choice upon review of all the above mentioned required information.
6. Attached are 3 pages that need to be filled out completely by the applicant and returned as instructed below:

APPLICATIONS MUST BE POSTMARKED BY MARCH 31, 2018

Please mail the application as follows:

**GILMER KIWANIS SCHOLARSHIP
P.O. Box 126
GILMER TX 75644**



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FULL LEGAL NAME: _____

DATE OF BIRTH: ___/___/___

HOME ADDRESS: _____

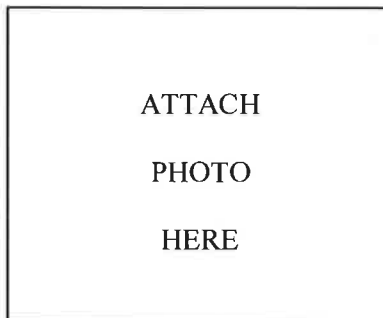
CELL: (____)____-____ E-MAIL: _____

PARENT OR GUARDIAN'S NAME: _____

ADDRESS OF PARENT OR GUARDIAN: _____

EMPLOYER OF PARENT OR GUARDIAN: _____

:



I affirm that the information herein is true and correct, and I hereby apply for this scholarship.

Date

Signature

PLEASE PUT THE FIRST LETTER OF YOUR FIRST NAME IN THE BOX





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PLEASE MAKE SURE THAT PAGES 3 AND 4 OF THIS APPLICATION ARE STAPLED OR CLIPPED TOGETHER BEFORE SUBMITTING TO THE GILMER KIWANIS CLUB

ANNUAL FAMILY INCOME: _____

NUMBER OF DEPENDENTS FILED ON TAX RETURN: _____

ANY SIBLINGS CURRENTLY ATTENDING COLLEGE? YES OR NO. HOW MANY? _____

NAME OF HIGH SCHOOL: _____

GRADUATION DATE: ___/___/___

OVERALL GPA: _____

SAT SCORE: VERBAL _____ MATH _____

TOTAL _____ TEST DATE _____

ACT SCORE: ENGLISH _____ MATH _____ SS _____

COMPOSITE _____ TEST DATE _____

CHOSEN COLLEGE OR UNIVERSITY _____

MAJOR FIELD OF STUDY _____

HAVE YOU BEEN ACCEPTED? _____

List your extracurricular activities in high school. (Use additional paper if necessary)



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List your history of participation in civic, social or cultural activities outside of high school.

<u>Year</u>	<u>Activity</u>	<u>Honor or Awards</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

List any other scholarships or financial aid programs for which you have applied.

Please attach an essay (2 pages maximum) stating “why you are applying, specific reasons you need financial aid, why you selected your major, your career plans, and any other information you feel is pertinent to your scholarship request.”

PLEASE PUT THE FIRST LETTER OF YOUR FIRST NAME IN THE BOX

