



## KT/DA Scholarship Application General Information Form

Every blank must be filled in. If a question is not applicable to your situation, enter "none" or "N/A" (not applicable). Please type or print.

Applicant's name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

Number and Street

\_\_\_\_\_ Telephone: \_\_\_\_\_

City, State, Zip code

How many family members, *besides the applicant* are attending post-secondary school?

\_\_\_\_\_

### Patient Status:

Which family member is a renal patient or donor: Applicant? Yes  No

If no, name of other family member and relationship

\_\_\_\_\_

—

Transplant  If so, date of transplantation

Hemodialysis  CAPD  Donor

Hospital or Center where patient is followed \_\_\_\_\_

### Applicant's Education:

Secondary School (attach official transcript of grades unless you are already attending post-secondary school):

Name:

\_\_\_\_\_

Address: \_\_\_\_\_

Name of Principal or Headmaster: \_\_\_\_\_

Anticipated date of

graduation: \_\_\_\_\_

### Honors and Activities:

Academic:

Extracurricular:

(Continued)



-  
-  
-  
-  
-  
-  
-

Please send the completed application and financial disclosure form to

George Arena, Chairman  
KT/DA Scholarship Committee  
38 Walnut Street  
Arlington, MA 02476

**ALL MATERIAL MUST BE IN OUR HANDS BY MAY 1, 2012.**



KT/DA Scholarship Application
Financial Disclosure Form

This form is to be completed by the Head of Household or Principal Wage Earner. All information is confidential. All questions must be answered. Enter "none" or N/A ("not applicable") where appropriate. Incomplete applications cannot be processed.

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_
Number and Street Telephone: \_\_\_\_\_
City, State, Zip \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

What is your relationship to applicant? \_\_\_\_\_

Are you employed? Yes \_\_\_\_\_ No \_\_\_\_\_ Retired \_\_\_\_\_ Occupation: \_\_\_\_\_

If employed, full time [ ] or part time [ ]

RESOURCES: Please attach a copy of your 2011 IRS Form 1040 (pages 1 and 2 only, do not include any schedules) for the principal wage earner(s) in the household.

Do you and your family rent [ ] or own [ ] your home?

Monthly payment: \_\_\_\_\_ Is heat included?

AMOUNT of OTHER HOUSEHOLD DEBTS: \$ \_\_\_\_\_

List any other scholarship aid already received by the applicant.

Four horizontal lines for listing scholarship aid.



## KT/DA Scholarship Application INSTRUCTIONS

Dear Applicant:

Eligibility is limited to kidney patients or kidney donors or members of a patient's immediate family who wish to continue their education beyond high school. Awards are based on both financial need and scholastic merit.

These are the instructions that you must follow in order to complete the application for a KT/DA Scholarship:

1) The **General Information Form** should be filled out by the Applicant. The **Financial Disclosure Form** is to be completed by the Head of the Household, not by the Applicant (unless the Applicant is the Head of Household).

2) All blanks must be filled in. If a question is not applicable to your situation, enter "N/A" for "not applicable."

3) The KT/DA Scholarship Committee requires **two** letters of reference, at least one of which is from a teacher.

4) Also required is an official transcript or grade report from your secondary school—or post-secondary school if already attending—with a grade point average on a four-point scale, where A equals 4.0, B equals 3.0, etc. If your report does not include such a GPA, please have your guidance department calculate it.

5) The deadline for receipt of all materials is **May 1, 2012**. Awards will be announced at our Annual Meeting on June 12. (You need not attend.)

The Scholarship Committee wishes all applicants the best of luck.

Sincerely,

A handwritten signature in cursive script, appearing to read "George Arena".

George Arena, Chairman  
KT/DA Scholarship Committee  
38 Walnut Street  
Arlington, MA 02476

If you have any questions, please contact the Scholarship Chairman, George Arena, at 781-646-1252.