

Dear Applicant:

Thank you for your interest in the **McDow-Smith Family Scholarship**. To qualify for this \$500 scholarship you must meet the following criteria:

1. Resident in Jersey Community District 100
2. Graduate successfully from Jersey Community High School current school year
3. Acceptance at an accredited post-secondary school
4. Financial need

In order to be considered for this scholarship, the following must be received on or before March 13, 2015 at the Jersey CUSD No. 100 District Office:

- A. Completed application form
- B. Transcript of all high school class work
- C. A copy of SAT scores
- D. Two letters of recommendation on the enclosed forms
- E. A few paragraphs describing a person from the past who has influenced your life

Failure to fill out the application completely, to include all required information, or to sign the application will result in disqualification of the applicant.

The recipient will be chosen by the Unit 100 Foundation scholarship committee.

We wish you continued success as you continue your educational pursuits.

Sincerely,

Mr. and Mrs. Larry Smith Family and
The District 100 Foundation Scholarship Committee

McDow-Smith Family Scholarship Application

This form can also be found at <http://www.jersey100.org>, click on Public Info, then District 100 Foundation, then the Scholarship/Mini Grant Information and Forms link

I. PERSONAL DATA

Name _____ Age _____

Address _____ City _____

County _____ Zip _____ DOB _____

Home Phone Number _____ Cell Number _____

II. FAMILY DATA

Father _____
Name Address Occupation

Mother _____
Name Address Occupation

Siblings, with ages _____

Family members currently attending college _____

Adjusted Gross Income of Family (line 36 of last U.S. Tax Form)

Less than \$25,000	_____	\$75,000 - \$99,000	_____
\$25,000 - \$49,000	_____	More than \$100,000	_____
\$50,000 - \$74,000	_____		

III. ACADEMIC DATA

High School _____ Graduation Date _____

Class Rank _____ of _____ G.P.A. _____ ACT Score _____

Advanced Placement and Honors Classes Taken _____

Post Secondary School, College or University you are attending:

Applied _____ Accepted _____ Major _____

Career Goal _____

IV. EXTRACURRICULAR ACTIVITIES (School and Community)

V. AWARDS, OFFICES, HONORS

VI. WORK EXPERIENCE

VII. HOBBIES AND INTERESTS

I hereby affirm the information contained in this application is true and correct.

Applicant's Signature

Date

District 100 Foundation

McDow-Smith Family Scholarship Recommendation Form

This form can also be found at <http://www.jersey100.org>, click on Public Info, then District 100 Foundation, then the Scholarship/Mini Grant Information and Forms link

Applicant's Name _____

- 1. How long have you known this student and in what capacity?**

- 2. Please describe your observation of this student's participation in school and community activities.**

- 3. What attributes do you observe in this student that would recommend them for this scholarship?**

- 4. What else would you like the committee to know about this applicant?**

Name

Position

Address

Phone