

Class of 2019
Scholarship Application
Kiwanis Indiana District
\$1,000

Deadline to Apply: FEB 15, 2019

WHAT DO I NEED TO INCLUDE????

OFFICIAL TRANSCRIPT? YES

LETTER OF RECOMMENDATIONS? YES

SIGNATURE OF GUIDANCE COUNSELOR? NO

COLLEGE LETTER OF ACCEPTANCE? NO

PHOTO? NO

WHERE TO RETURN COMPLETED APPLICATION?

David Herman
PO Box 1501
Logansport, IN 46947
574-721-7507
DPH66@comcast.net

KIWANIS INDIANA FOUNDATION, INC.

2019 Scholarship Application



Information & Instructions for Applicant

- The deadline for submitting this application to your local Kiwanis Club is FEBRUARY 15, 2019.
- Submit your completed application and high school transcript to your local Kiwanis Club.
- This is a one-time award of \$1000.00. Applicant **MUST** attend a school in Indiana for their post-high school education to qualify for this award.
- All sections must be completed, and the Sponsoring Kiwanis Club information must also be completed by the local Kiwanis Club President or Club Representative.

Applicant's Last Name: _____

First Name: _____ Male or Female

Phone: (____) _____

Street Address: _____

City: _____

State / Zip: _____

Email Address: _____

Are you a Key Club Member? Yes or No

If yes, year(s) a member 20__ to 20__

College / Other Schools you plan to attend:

Degree and Career Goals, if known:

Is your father a Kiwanis Member? Yes or No

Club Name: _____

Is your mother a Kiwanis Member? Yes or No

Club Name: _____

Have you received other scholarships? _____

If yes, please list them. _____

PLEASE TYPE or PRINT ENTIRE FORM

Attach extra pages as necessary
Do not use the back of this form

Attachment #1

List Extra-Curricular High School Activities & Identify your Leadership Role(s)

Attachment #2

List your Leadership Role in Community Activities (Church, 4-H- Scouts, etc.)

Attachment #3

List your Community Service & Estimate # of Hours
(Sophomore – Senior Years)

Attachment #4

List your Part-Time Work – Number of Hours (Soph.-Senior Years)

Academic Achievement GPA as of 12/31/2018:

SAT SCORES

Verbal _____ Math _____ Writing _____ TOTAL _____

ACT SCORES

English _____ Math _____ Reading _____

Science _____ Composite _____ English/Writing _____

Scholarship Applicant's Signature

Date: _____

SECTION MUST BE COMPLETED BY SPONSORING KIWANIS CLUB

Kiwanis Club/Division: _____

Club Mailing Address: _____

City: _____ St: _____ Zip: _____

Club President's Name: _____

President's Email: _____

Signature of Club President: _____

President's Phone: (____) _____

Sponsoring Kiwanis Club MUST return completed application ON or BEFORE March 15, 2019 (late applications will not be considered).