### Herbert J. and Anna W. Cornwell Memorial Scholarship

#### GUIDELINES AND ELIGIBILITY CRITERIA

- 1. Applicants must be a graduate from a Stafford county high school.
- 2. Recipients must enroll full time in an institution within the boundaries of Kansas.
- 3. Incomplete applications will not be considered nor will they be returned.
- 4. The applicant must have earned a minimum 2.75 GPA for the most recent semester in which he/she was enrolled.
- 5. To be considered, all applications must be postmarked or received by the 2nd Monday in June for fall semester consideration or by the 2nd Monday in November for spring semester consideration.
- 6. Grades or correspondence from the student to the committee must be postmarked by December 31st.

#### INSTRUCTIONS FOR COMPLETING THE APPLICATION

- 1. Application must be typed on the original form, (front side only)
- 2. Completed applications must be assembled in the following order:
  - a. Typed application
  - b. Official high school transcript
  - c. Official transcripts from all post-secondary institutions (if applicable)
  - d. Two character reference letters from non-family members must be submitted with the application.

#### INSTRUCTIONS FOR REAPPLICATION

- 1. Complete and mail only the "FACT SHEET" of the application and attach an "OFFICIAL TRANSCRIPT" from the current post-secondary institution. Must be postmarked by the 2nd Monday in June.
- 2. If your circumstances have changed considerably and you believe this would affect your scholarship, please fill out the complete application.

# **SEND COMPLETED APPLICATIONS AND REAPPLICATIONS TO:**

Your Graduating School District

Cornwell Memorial Scholarship USD 349 - Stafford 430 E. Broadway St. Stafford, KS 67578 Cornwell Memorial Scholarship USD 350 - St. John 505 N. Broadway St. John, KS 67576

Cornwell Memorial Scholarship USD 351 - Macksville 417 N. Gillmore Macksville, KS 67557

# Cornwell Memorial Scholarship Application FACT SHEET

| Name of Applicant   |  |                   | S.S.#       |                                  |  |  |  |  |
|---|--|-------------------|-------------|----------------------------------|--|--|--|--|
| Permanent Address   |  |                   |             |                                  |  |  |  |  |
|   | (Street Address)                             |                   |             |                                  |  |  |  |  |
|   |  | Telep             | hone:       |                                  |  |  |  |  |
|   | (City, State, Zip)                           |                   |             |                                  |  |  |  |  |
| College Address   |  |                   |             |                                  |  |  |  |  |
|   | (Street Address)                             |                   | Г           |                                  |  |  |  |  |
|   | (City, State, Zip)                           | Telep             | hone:       |                                  |  |  |  |  |
| Educational Backgro   |  |                   |             |                                  |  |  |  |  |
|   | from which you graduted:                     |                   |             |                                  |  |  |  |  |
| Please Check One:   | l am a first time applicant for Cornwell     | Scholarship       |             |                                  |  |  |  |  |
|   | I am reapplying for the Cornwell Scholarship |                   |             |                                  |  |  |  |  |
|   | I would like the commitee to review m        | ıy scholarshi p c | due to a cl | nange in circumstances.          |  |  |  |  |
| Fill in the blanks to indicate your plans for further education |  |                   |             |                                  |  |  |  |  |
| I plan to enroll at   |  |                   | in          |                                  |  |  |  |  |
|   | (name and location of school)                |                   |             | (month & year)                   |  |  |  |  |
| to study in the field of  |  |                   |             | . I plan to obtain the following |  |  |  |  |
| degree  |  |                   | At enrollr  | nent I will be classified as a   |  |  |  |  |
|   |  |                   |             |                                  |  |  |  |  |
| (Fr, So, Jr, Sr or Gra  | duate)                                       |                   |             |                                  |  |  |  |  |

#### **CERTIFICATION STATEMENT**

Please read and sign the following statement after completing the application.

"I certify that, to the best of my knowledge and belief, all information contained in this Scholarship application is accurate, true and complete."

(Signature of applicant)

### STATEMENT OF FINANCIAL NEED

⊖ NO

Are you claimed as a dependent on your parent's income tax return? YES

(If yes, you must furnish information for both yourself and your parents. If no, complete only "student" column)

|   | <u>Student</u> | Parent/guardian |
|---|----------------|-----------------|
| Adjusted Gross Income (From income tax return)            |                |                 |
| <u>Untaxed income &amp; benefits</u>                      |                |                 |
| Social Security Benefits                                  |                |                 |
| Aid to Families with<br>Dependent children<br>AFCD or ADC |                |                 |
| Child support received                                    |                |                 |
| Scholarships Awarded                                      |                |                 |
| Grants Awarded  |                |                 |

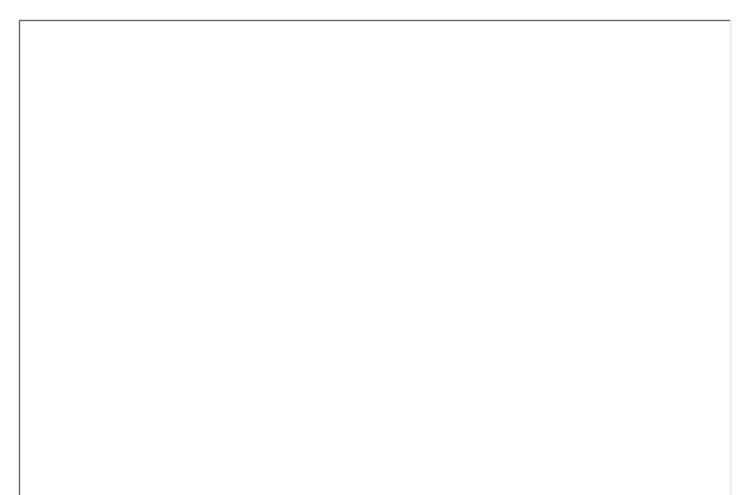
\*\* The selection committee reserves the right to request supporting documents.

In the space provided below, type a paragraph or more aimed at convincing the Scholarship Selection Committee that you need financial assistance in order to continue you education. Include any extenuating circumstances that should be taken into account when considering the financial status of the family (This could include outstanding loans, unusual medical bills, etc.)

### PAST ACADEMIC RECORD

| 1. | On a 4.0 scale wh  | n a 4.0 scale what is your current overall G.P.A.? |              |            |                 | or        |         | College |
|----|--------------------|--|--------------|------------|-----------------|-----------|---------|---------|
| 2. | If available, give | the folloing info                                  | ormation:    |            |                 |           |         |         |
|    | ACT Scores         | English  | Mathematics  | Reading    | Sci. Reasoning  | Composite | Writing |         |
|    | SAT Scores         | Critical Reading                                   | Mathematics  | Writing    | Multiple Choice | Essay     |         |         |
|    | GRE Scores         | Verbal   | Quantitative | Analytical |                 |           |         |         |

3. In the space provided below, type a paragraph or more aimed at convincing the Scholarship Selection Committee that you have demonstrated academic success in your past schooling and that you will be academically successful in your future schooling.



## **FUTURE PLANS**

In the space below, type a paragraph or more summarizing your plans for the future. You might include details such as your career plans, what you have done so far, and what still needs to be done to prepare for that career, how effective you will be in contributing in that career etc.

Remember, your purpose is to inform.

# CITIZENSHIP AND COMMUNITY INVOLVEMENT

You previously related your aademic honors and achievements. In the space below, type a paragraph or more summarizing your citizenship and contributions to you school and community through extra curricular activities, honors, leadership roles, and work experience. You might want to include any other unusual or miscellaneous information about your background and/or your plans that you believe the Scholarship Selection Committee should know about.