

# KIWANIS INDIANA FOUNDATION, INC.

## 2020 Scholarship Application



### Information & Instructions for Applicant

- The deadline for submitting this application to your local Kiwanis Club is March 2, 2020.
- 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 12/31/2019:

\_\_\_\_\_

#### 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 16, 2020 (late applications will not be considered).**