

# KIWANIS INDIANA FOUNDATION, INC. 2026 Scholarship Application



## Information & Instructions for Applicant

- Submit your completed application, high school transcript, and attachments to your local Kiwanis Club.
- This is a one-time award of **\$2,500.00**. 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: \_\_\_\_\_

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)

### Attachment #5

High School Transcript

### Academic Achievement      GPA as of 12/31/2025

\_\_\_\_\_

### 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 February 28th, 2026 (late applications will not be considered).**