

# KIWANIS CLUB OF VERO TREASURE COAST SCHOLARSHIP APPLICATION

## CRITERIA FOR SCHOLARSHIP:

1. Complete and timely submission of this Application with required documentation postmarked by or before March 15th- Application must be completed in full;
2. Minimum 2.5 cumulative unweighted grade point average;
3. Minimum 300 hours of community service;
4. Participation in an approximately 20 minute interview with the Kiwanis Scholarship Committee is required for finalists; and
5. Presence of awardee at the award ceremony required in order to receive scholarship funds.
6. Participation In Key Club or Kiwanis Youth In Action is heavily weighted in the selection process.
7. Must be Indian River County Resident.

## THE FOLLOWING ITEMS MUST BE INCLUDED WITH YOUR APPLICATION:

1. A one or two page typewritten essay telling about yourself and your involvement in community service. Service may be done individually or through a club or organization such as a church, a children's organization, organizations helping the elderly, Kiwanis Key Club, Kiwanis Youth in Action, or other. Include any documentation or commendations for your community service work.
2. Include your high school transcript and/or other documentation of academic performance.
3. Include a summary of extra curricular school activities and a list of honors/AP/Dual enrollment classes taken for grades 9-12.
4. Include S.A.T., A.C.T., or other standardized testing scores and documentation.

APPLICATIONS MUST BE POST MARKED ON OR BEFORE MARCH 15TH AND MAILED BY THE STUDENT IN ONE ENVELOPE TO:

**Scholarship Committee  
Kiwanis Club of Vero Beach  
P.O. Box 6381  
Vero Beach, FL 32961.**

## APPLICANT INFORMATION- PLEASE PRINT:

Full Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

Email: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Sex: \_\_\_\_\_. High School: \_\_\_\_\_

Date of High School Graduation: \_\_\_\_\_.

Father's Full Name: \_\_\_\_\_ Age: \_\_\_\_\_ Living? \_\_\_\_\_

Occupation: \_\_\_\_\_ Name of Business \_\_\_\_\_

Mother's Full Name: \_\_\_\_\_ Age: \_\_\_\_\_ Living? \_\_\_\_\_

Occupation: \_\_\_\_\_ Name of Business: \_\_\_\_\_

Are you living with both parents? \_\_\_\_\_ If not then with whom? \_\_\_\_\_

Any specific financial needs?

**WORK EXPERIENCE:**

**COLLEGE INFORMATION:**

Applicant's College of Choice: \_\_\_\_\_

Address: \_\_\_\_\_

Have you been accepted?(circle one) Yes/No/Not yet notified

To what other colleges have you applied?

a) \_\_\_\_\_

b) \_\_\_\_\_

c) \_\_\_\_\_

Expected College Major: \_\_\_\_\_

Career Goal: \_\_\_\_\_

**ANTICIPATED EXPENSES FOR THE UPCOMING SCHOOL YEAR:**

Tuition: \$ \_\_\_\_\_

Room/Board: \$ \_\_\_\_\_

Books: \$ \_\_\_\_\_

Travel: \$ \_\_\_\_\_

Misc.: \$ \_\_\_\_\_

Total: \$ \_\_\_\_\_

Have you saved any money for your college expenses?(circle) Yes/No

Please list Scholarships, tuition waivers, and other support already confirmed:

Source	Amount(\$)
_____	_____
_____	_____
_____	_____

Other Scholarships or funding expected or applied for:

Source	Amount(\$)
_____	_____
_____	_____
_____	_____

Cumulative Weighted GPA: \_\_\_\_\_

Cumulative Unweighted GPA: \_\_\_\_\_

Class Rank: \_\_\_\_\_

Class Size: \_\_\_\_\_

ACT Comp. Score: \_\_\_\_\_

SAT Score: \_\_\_\_\_

I hereby certify that all information given in this Application is true and correct.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_