

BILL AND ARDIS EVANS SCHOLARSHIP

APPLICATION FORM

This application form must be completed in its entirety and mailed or delivered by the applicant to the 6th grade counselor's office at Evans Middle School. Questions may be directed to Becky Henderson, Scholarship Coordinator, Indian Hills Community College Foundation, (641) 683-5156, or becky.henderson@indianhills.edu.

APPLICATION MUST BE POSTMARKED NO LATER THAN APRIL 1.

PERSONAL DATA

Name: _____
Last First Middle

Home Address: _____
Street City State Zip

Home Phone No. (_____) _____ Social Security No. _____

Date of Birth: ____/____/____

What Elementary School did you attend: _____

Father's/Guardian's Name: _____

Highest grade attended: _____

Mother's/Guardian's Name: _____

Highest grade attended: _____

PERSONAL LETTER

You must attach a letter **hand written by the student** expressing your educational interest and goals along with a description of other personal interest which may be considered by the scholarship committee such as: *Why do I deserve a scholarship?*

This section must be completed in order to be considered for this scholarship.

LEADERSHIP

School Activities (clubs, drama/theater, student council, athletics, musicals, band, orchestra, choir, or other school activity).

Activity

Years

Community Activities (church, scouting, 4-H, clubs, etc.) Indicate years involved.

Activity

Years

Work Experience (paper route, baby-sitting, etc.)

Employer

Position Held

Years

Hobbies and Interest

FINANCIAL INFORMATION

The following Financial Statement should be completed by all applicants. Extraordinary financial circumstances may be considered by the scholarship committee in reviewing your application: business setback, special medical expenses, loss of employment by parent/guardian, etc.

Father or Guardian's Occupation/Employer: _____

Mother or Guardian's Occupation/ Employer: _____

List All Family Members:

	Name	Age	School/College If Attending
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____

Family income represented as *Adjusted Gross Income on 1040* for last year:

Less than \$10,000	_____
\$10,000 - \$15,000	_____
\$15,000 - \$20,000	_____
\$25,000 - \$30,000	_____
\$30,000 - \$40,000	_____
\$40,000 - \$50,000	_____
More than \$50,000	_____

Statement of extraordinary financial circumstances to be considered:

All information will be held in strictest confidence by all parties involved in the selection process.

The undersigned acknowledges that the information provided is true to the best of his/her knowledge and that copies of test scores, grades, etc. may be released to this selection committee.

Signature of Applicant

Signature of Parent/Guardian

Signed this _____ day of _____ 20____



This section is to be completed by Evans Middle School personnel. Nomination letter and application, along with student information from their cumulative folder is to be submitted by Evans Middle School personnel.

SCHOLARSHIP INFORMATION
EVANS MIDDLE SCHOOL

ITBS Composite Score: _____

Other Test Scores: _____

Anticipated Honors and Awards: _____

Signature of Evans Middle School 6th grade counselor

Date

It is the policy of the Indian Hills Community College and the Ottumwa Community School District not to discriminate on the basis of sex, race, national origin, creed, age, marital status, or disability in its educational programs, activities, or employment policies as required by Title VI and VII of the 1964 Civil rights Act, Title IX of the 1972 Educational Amendments, and Section 504 of the Federal Rehabilitation Act of 1973.