



McSwain Foundation Scholarship Application

PURPOSE:

To provide financial assistance to graduating seniors or students currently enrolled in a college or university. The McSwain Foundation Scholarship Program will award scholarships annually to a child/spouse/member of the Lawrence-Douglas County Fire Medical Department.

APPLICATION PROCEDURE:

Scholarship applications are available on our website at www.mcswainfoundation.com

Applications should include 1 copy of all required documentation. All applications should be completed in full and accompanied by required documentation. Incomplete applications will not be considered.

Completed application packets should be forwarded to Gillian Allen at mcswainfoundationks@gmail.com or drop off at Station 1 located at 746 Kentucky St.

McSwain Foundation should receive all completed scholarship applications by **June 1**.

EVALUATION PROCEDURE:

A selection committee will review and evaluate all completed applications. McSwain Foundation will notify the applicant and the parent of the winners selected by **June 15**.

To apply for the scholarship, an applicant must meet the following criteria of academic standing, college major plans, leadership and character:

Academic Standing: The applicant must be a graduating senior or currently enrolled in a college or university with a minimum grade point average of 2.7 on a 4.0 scale. An official transcript must be included with the application.

College Entrance Exam: If the applicant has taken either the ACT or SAT college entrance examination, provide proof of the test scores. The scores may be verified either on the applicant's official transcript or with a separate record of the score attached to the application. The information should reflect the date the test was taken.

College Enrollment: The applicant must be enrolled in one of the following--an accredited two-year or four-year college, university, technical school or continuing education program (post High School education). If available at time of application, a copy of the acceptance letter for enrollment should be included with the application.

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Activities: Character of the applicant should be demonstrated through responses to the categories of the application detailing honors and awards, activities and work experience.

References: Each applicant must provide 2 letters of personal reference from persons other than relatives of the applicant. References must be typed, should not exceed one page in length, and must be attached to the application. References should include the name, address and daytime phone number of the person providing the reference, and the relationship of the reference and applicant should also be indicated (e.g., educator, counselor, employer, clergy).

PAYMENT OF SCHOLARSHIP:

Payment of the scholarship will be made directly to the college or university and applied to the student account.

CERTIFICATION BY APPLICANT:

I hereby certify that the statements contained in this application are true, accurate and complete. I certify that I presently meet all eligibility requirements set forth in this application. I understand that any false statement in this application shall constitute grounds for revocation or withdrawal of any awarded scholarship.

Name of Applicant: _____

Signature of Applicant: _____ Date: _____

Applications will not be returned and become property of McSwain Foundation.

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PERSONAL INFORMATION:

Name: _____

Phone: _____

E-Mail Address: _____

Address: _____

City: _____ State: _____ Zip Code: _____

DOB: _____

Father/Guardian's Name: _____ Daytime Phone: _____

Address: _____

City: _____ State: _____ Zip Code: _____

(If different from applicant's)

Mother/Guardian's Name: _____ Daytime Phone: _____

Address: _____

City: _____ State: _____ Zip Code: _____

(If different from applicant's)

Name of parent employed by LDCFM: _____

Station: _____ Shift: _____

ACADEMIC INFORMATION

Name of High School: _____

GPA after completion of first semester of senior year.

(Copy of official transcript must be included with this application.)

Weighted: _____ Unweighted: _____

ACT Score: _____ Date(s) taken: _____

SAT Score: _____ Date(s) Taken: _____

Your intended field of study: _____

Name of academic institution you plan to attend: _____

Why do you feel you should receive this scholarship? (Add additional paperwork if needed)

How do you plan to use your education?

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Tell me a little about your family and how the scholarship will benefit? (Add additional paperwork if needed)

ACTIVITIES SUMMARY:

Honors and Awards

Please list up to five honors, distinctions or letters you have earned.

1.

2.

3.

4.

5.

Activities/Community Service

List up to six activities, school related or otherwise, in which you have been involved.

1.

2.

3.

4.

5.

6.

Work Experience

List up to four job you have had since the 9th grade. Indicate places and dates of employment.

1.

2.

3.

4.
