

The Salem Promise

Scholarship Application Information

***All graduating high school seniors
residing in Salem Township are eligible to apply***

***FAFSA forms must be completed and information included here
prior to submitting this application***

Submission deadline is April 30, 2020

The Salem Promise

Scholarship Application

For Salem Township residents planning to attend
A Michigan University, College, or Vocational Training School

* Information on this application is considered personal and confidential. Information provided to the Scholarship Committee will not be shared or used for any purpose other than for which it is intended

APPLICANT INFORMATION

Name _____

Residence Address _____ Phone _____

City _____ State _____ Zip _____

Email: _____ Phone: _____

How long have you lived at this address? _____ Student Id or Birth date _____*

* Needed to identify you at the school of your choice.

HIGH SCHOOL DATA

Cumulative GPA (based on a 4.0 scale) _____ Attendance Record (%) _____

Counselor Recommendation _____ Transcript Copy _____ ACT Score _____

Please comment on any items you feel need an explanation.

APPLICANT PROFILE

List any awards, honors or special recognitions that you have received **in the last four years**. Attach a separate page if necessary.

<u>Award/Honor</u>	<u>Reason for Award/Honor</u>	<u>Year Awarded</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

List below any school, community service, or other activities with which you have been involved **during the last four years**. Attach a separate page if necessary. List in order of importance to you, from most important to least important.

<u>School Activities</u>	<u># of Years Participated</u>	<u>Special Honors or Leadership Positions</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

#of Hours

Special Honors

<u>Community Service/Volunteer Activities</u>	<u>#of Years Participated</u>	<u>Committed Per Year</u>	<u>or Leadership Positions</u>

<u>Other Activities</u>	<u># of Years Participated</u>	<u># of Hours Committed Per Year</u>	<u>Special Honors or Leadership Positions</u>

List your work experience below. You may attach a resume if you prefer.

<u>Employer</u>	<u>Position Held/Duties</u>	<u>Date of Employment</u>	<u>Avg. Hours Worked Per Week</u>

ESSAY

On a separate page, please describe your personal and educational goals. Tell us what you plan to major in, why you have chosen that particular field, and what you plan to do with your degree.

Your narrative, which should **not exceed one page**, will be a significant part of your overall score so you should give it considerable thought. Your essay should be **DOUBLE SPACED, TYPED or PRINTED IN BLACK INK** with no smaller than **FONT SIZE 11**.

APPLICATION CHECKLIST

Please make sure your application is complete.

In support of this application, please include:

- A completed, signed scholarship application.
- Essay narrative/or special attachment.
- A copy of current/most recent school transcript.
- Letter of recommendation from either a teacher or Counselor.

FAMILY OR HOUSEHOLD INFORMATION

Are you listed as an exemption on your parents Federal Tax return? Yes No

Name of father/guardian _____
Residence Address _____ Phone _____
City _____ State _____ Zip _____

Occupation _____
Employer _____ How long? _____

Name of mother/guardian _____
Residence Address _____ Phone _____
City _____ State _____ Zip _____

Occupation _____
Employer _____ How long? _____

Have you filed a FAFSA form? Yes No (if No, explain)

Have you received a scholarship or grant? Yes No

Are you eligible for any other financial assistance? Yes No

If you are eligible for a scholarship or other financial aid, please explain.

RECOMMENDATION

A letter of recommendation is required for your application to be considered. *See attached recommendation form.*

CERTIFICATION

I/We hereby affirm that the information provided on this form and the accompanying material is accurate and complete to the best of my/our knowledge. Falsification of information may result in termination of any scholarship granted.

Applicant's Signature Date

Parent's or Guardian's Signature (if applicant is under 18) Date

RECOMMENDATION FORM

Name of Applicant: _____

Please provide information you believe would be helpful in considering the applicant for a scholarship. Brief, but specific, comments would be appreciated in regard to the following areas:

1. The nature and extent of your relationship with the applicant (how you know him/her).
2. Your impression of the applicant's character and personality.
3. Your thoughts on his/her potential for success.

You may use additional space or attach a letter if you prefer.

Name: _____

Signature: _____ Date: _____

Address: _____

Telephone: _____

Mail completed application to:

The Salem Promise
P.O. Box 75319
Salem, Michigan 48175