# **SCHOLARSHIP PROGRAM CRITERIA**

The Ian Cameron Thomas Memorial Foundation (ICTMF) established the annual Ian Cameron Thomas Scholarship for students pursuing college degrees. An individual is eligible to apply annually for education-related expenses if he or she meets the established criteria. The scholarship amounts will vary depending on individual needs.

# **ELIGIBILITY REQUIREMENTS**

|  |  |
| --- | --- |
| * Black or African American, Asian, Hispanic, or Latino, Native Hawaiian or Other Pacific Islander, American Indian or Alaskan Native.
 | * Currently enrolled in or accepted into an accredited college or university as a full-time, degree-seeking student program.
 |
| * Demonstrates a commitment to serving diverse populations
 | * Demonstrates leadership abilities through participation in community service, extracurricular, or other volunteer activities
 |
| * Cumulative GPA of 3.0 or better on a 4.0 scale
 | * Citizen of the United States
 |

# **INSTRUCTIONS FOR COMPLETING SCHOLARSHIP APPLICATION**

Please complete the application by typing or printing legibly. Only completed and signed applications will be considered. **Please submit the following items with this completed application form.**

1. Copy of your most **recent transcript of grades** from current or last school attended. **An official transcript from the school is required by the August 15, 2023.**
2. **Three original letters of recommendation** from individuals who are not related to you, the applicant. One must be from your school faculty advisor. All must be in original form and must be signed and emailed to the Scholarship Selection Committee.
3. On a separate sheet of paper, please specify your involvement, and dates of participation, in **community service, extracurricular activities, volunteer involvement,** and any awards and honors you have received.
4. On a separate sheet of paper, please prepare a **personal statement**, not to exceed 1,500 words, indicating your interest in and commitment to your preferred degree, examples of your involvement in your minority community, your career goals, any other information on significant financial difficulties you are experiencing, and why you feel you should be selected to receive the scholarship.
5. Provide proof of citizenship.
6. Provide copy of driver’s license or other State-Issued ID (copies of both front and back).
7. Provide a letter of acceptance into your chosen program.
8. Provide a copy of your complete Student Aid Report (SAR). This is obtained after filing your Free Application for Federal Student Aid (FAFSA) and must show the “Application Receipt Date:” “Processed Date:” and “EFC” (estimated family contribution).

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# **APPLICANT’S PERSONAL INFORMATION**

**Last Name**: **First Name**: **Middle** \_ \_\_\_\_ Gender:  Female  Male Date of Birth: / /

Classification for 2023-2024  College Freshman  College Sophomore  College Junior

* + College Senior  Graduate-level Student

**Type of Academic Program** (Specify degree seeking below)

* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Ethnicity**

* Native Hawaiian or Other Pacific Islander  Black or African American  Hispanic or Latino
* American Indian or Alaskan Native  Asian
* Two or more races (all persons who identify with more than one of the above six races)

|  |  |
| --- | --- |
| PERMANENT/HOME ADDRESS | TEMPORARY/SCHOOL ADDRESS (if different) |
| Street: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Street: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_ | State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_ |

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

Day Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Evening Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# **FINANCIAL INFORMATION**

Are you receiving other financial aid or support for the upcoming academic year?  Yes  No

Have you previously applied for the Ian Cameron Thomas Scholarship?  Yes  No

Have you applied for other Scholarships?  Yes  No

Have you applied for Financial Aid?  Yes  No

If no, why not? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| 1. INDEPENDENT STUDENT
 | 1. DEPENDENT STUDENT
 |
| Did you personally file income taxes for the previous tax year?  Yes No | Did your parent or guardian file income taxes for the previous tax year? Yes No |
| If yes, number of dependents you claimed? \_\_\_\_ | Did your parents or guardian claim you as a dependent? Yes No |
|  | Total number of dependents that your parent or guardian claimed? \_\_\_\_\_ |

Are you currently employed? Yes No Full or part time? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If employed, where: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| **PROJECTED ANNUAL SCHOOL EXPENSES FOR 2023-24** | **PROJECTED SOURCES OF INCOME FOR** **2023-24** |
| Tuition | $  | Parents Contribution | $ |
| Room/ Board /Housing | $ | Grants -specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ |
| Other Educational Expenses -specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ | Scholarships – Specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ |
| Other Expenses –specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ | Student Employment Income | $ |
| **TOTAL PROJECTED EXPENSES** | **$** | **TOTAL PROJECTED CONTRIBUTION** | **$** |

How did you hear about the Ian Cameron Thomas Scholarship?

* Friend  School Fair
* Faculty  Website
* Parent  Other: please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# **ACADEMIC INFORMATION**

Are you currently enrolled or accepted into a program at an accredited college or university in the upcoming academic year?  Yes No

Expected Graduation Date from Program / /\_\_\_\_\_\_

List all high schools, colleges and universities attended, including current:

**Name of School Location Dates Attended Degree Received**

School to which you would apply an Ian Cameron Thomas Scholarship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing address to college/university accounting/financial aid department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# AGREEMENT & TERMS OF IAN CAMERON THOMAS SCHLOARSHIP APPLICANTS

I understand that the Ian Cameron Thomas Scholarship Committee may request additional information, including a personal interview, to decide on my application. I agree that if this application is accepted and I receive a scholarship award, I will be bound by the terms and conditions of the award.

If I am selected for this scholarship, I agree to provide a copy of my official transcript (grades) at the end of each semester.

I understand that scholarship funds may only be applied to offset financial obligations that I have incurred or reasonably expect to incur for tuition, room and board, and other educational expenses during the academic year. I further understand that if I receive a scholarship and accept the award, a check for my tuition, room, and board (if applicable) will be paid directly to the college or university. I understand that I must submit documentation of other educational expenses, which, upon approval, will be reimbursed directly to me. I further understand that I am responsible for any tax liability incurred because of this award.

I certify that the statements that I have provided on this application are true and correct and are given for obtaining a scholarship from the ICTMF. I authorize ICTMF to verify the statements contained herein and I understand that all personal information contained on this application will be held in confidence by the Ian Cameron Thomas Scholarship Committee. All personal identifiable information (PII) obtain for verification will be destroyed after scholarship award.

FOR QUESTIONS OR ADDITIONAL INFORMATION PLEASE CONTACT scholarship@malcle.com

*\*\*All information obtained by the committee will solely be used to determine scholarship qualifications. Information will not be sold to third parties. \*\**