



SOUTHWEST DISTRICT KIWANIS FOUNDATION



\$1,000.00 BOB KAY MEMORIAL SCHOLARSHIP APPLICATION

Supported by the Ellis Brown Youth Endowment Fund

PRINT OR TYPE ALL DETAILS ON APPLICATION FORM

Name _____

Address _____

City _____ State _____ ZIP _____

Home Telephone _____

Email Address _____

High School Attending _____ City _____

Please indicate on the following form, your **Leadership** experience and **Service to Community**. Please include two letters of recommendation. Attach an official transcript. Scholarship will be awarded based on academics, leadership skills, and community service. Financial need may be considered.

The scholarship will be awarded after the first grading period when an official transcript and proof of continuing education is received from your college or university. A "C" AVERAGE OR BETTER IS A CONDITION OF THE AWARD.

Signed _____ Date _____

MAIL THE COMPLETED APPLICATION WITH SUPPORTING DOCUMENTS BY MARCH 3, 2019 TO:

Stephanie Carrasco
1118 E Via Nicola
San Tan Valley, AZ 85140

EMAIL: mns24@aol.com

CRITERIA FOR BOB KAY MEMORIAL SCHOLARSHIP

- I. **Leadership** – List School Club Names and offices held or other organizations, ie. JROTC – Commander 2018-19, Yearbook Editor – 2017, Village Meadows Baptist Church – Youth Leader 2016-20. Attach additional pages if necessary.

- a. _____
- b. _____
- c. _____
- d. _____

- II. **Service to Community** - List your community service and hours served. Attach additional pages if necessary.

Organization Served	Hours
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	

Signature of parent or guardian _____

Statement of financial need – Please list other sources of financial aide available to your student.

Briefly describe how this scholarship will help your student to pursue their education?

Please write about your favorite service project. Include the purpose, who and how many were involved, how many benefited, how did they benefit, cost and why this is your favorite project. Must not be more than 1,000 words.