

Deadline Approaching

KIWANIS SCHOLARSHIP APPLICATION FORM
Kentucky – Tennessee Kiwanis District Foundation

Applicant's Name _____ Date _____

Address _____

Phone No: _____ Email: _____

Name of Kiwanis Parent or Grandparent _____

Name of Kiwanis Club _____ Division Number _____

Name and address of local newspaper _____

High School Applicant Currently Attends _____

Classification _____
(High School Senior, College Freshmen, Sophomore, Junior)

Name of Institution that you are planning to attend _____

Signature of Applicant

Signature of Kiwanis Club President

This application along with the letter described in item 3 in the requirements must be postmarked no later than January 31 of the applicable year. Submit to:

K – T District Foundation
PO Box 4327
Lexington, KY 40544
Email: ktdistrict@kytnkiwanis.org
Phone : (859) 721-5685

FOUNDATION FOR THE FUTURE

ANNOUNCEMENT OF KENTUCKY-TENNESSEE KIWANIS DISTRICT FOUNDATION SCHOLARSHIPS

The KY-TN Kiwanis Foundation can award **ten \$1,000** scholarships throughout the District. The scholarships will not be awarded by Division.

REQUIREMENTS

1. Each applicant **must be a child or grandchild** of an active member of a Kiwanis Club in the K- T District.
2. An applicant must be currently enrolled as an undergraduate in an accredited institution of higher learning or must be a high school senior with plans to attend such an institution in the fall immediately following graduation.
3. Each applicant must submit along with the application a letter (not to exceed two typewritten pages) addressed to the Selection Committee no later than January 31 of the applicable year. The applicant must tell the committee something about him/herself such as extracurricular activities, community service, employment history, etc. **The letter and application must be signed.**
4. Recipients of scholarships will not be eligible a second year.

All applicants will be notified of the results of the selection process by letter. The successful applicants selected will be required to submit the following postmarked no later than July 1, of the applicable year:

1. **A letter from the higher education institution indicating that the applicant is currently in good standing or has been accepted for the fall term immediately following high school graduation.**
2. **The student identification number being used at the institution**
3. **Name and address of the Financial Aid Office of the institution**

Note: Items 1, 2, and 3 are the responsibility of the applicant, not the higher education institution.

The K – T District does not discriminate on the basis of race, color, national origin, religion, sex, or disability. **Please copy this requirement sheet and the application form. Distribute to children or grandchildren who are interested in applying for a scholarship.**