



KELLY McADAMS MEMORIAL SCHOLARSHIP APPLICATION

Scholarship Information:

The Kelly McAdams Memorial Scholarship Fund has been established to honor the memory of Kelly McAdams *a graduate of our local schools and a life long student with an inquisitive mind*. The Scholarship Committee intends to award one scholarship of approximately \$1,500-\$2,500 in 2010.

Purpose:

The award is intended to support deserving high school students from San Luis Obispo County.

Eligibility Criteria:

- a) Applicant is currently a senior at a San Luis Obispo County high school and;
- b) Applicant is planning to attend full-time at an approved vocational school, community college or four-year college/university during the 2010-11 academic year and;
- c) The qualifying student will exhibit a (1) strong academic record, and (2) demonstration of "*Kiwanis*" type leadership throughout their high school years by participating in ongoing or multiple volunteer activities whether at school or in the community that focused on service to children and (3) financial need.

Application Deadline - February 12, 2010

All materials must be submitted to the Foundation office by 5:00 p.m. on Friday, February 12, 2010.

No fax or e-mail materials accepted.

San Luis Obispo County Community Foundation
Mailing Address:

P.O. Box 1580, San Luis Obispo, CA 93406

San Luis Obispo County Community Foundation
Street Address: (for drop-off materials only)

1401 Higuera Street, San Luis Obispo, CA 93401

KELLY McADAMS MEMORIAL HIGH SCHOOL SCHOLARSHIP APPLICATION INSTRUCTIONS

- Complete the **Application Form** and Sign the **Certification**.
- Complete the **Honors/Activities/Community Service Sheet**.
- Write a **Personal Statement/Essay** (maximum 1 typed page) and enclose it with your application. Your essay should demonstrate your address your career and educational goals and how your Kiwanis type leadership experience, both on and off the campus, has impacted your life and goals/plans for the future The essay will demonstrate your ability to organize thoughts and express yourself. Grammar, spelling, and clarity of purpose are important.
- Submit a **Academic Letter of Recommendation**. This should be from a school district teacher. Use the enclosed form, or ask the recommender to write a letter on the school letterhead. The form and/or letter should be attached to the student's application. The recommendation cannot be from a family member.
- Submit a **Community Service Recommendation**. This should be from someone who has supervised your community service volunteer activities. The letter should detail your Kiwanis type leadership/volunteer activities which focused on children. The letter may not be from a family member.

If possible, please compile all application materials and submit a single application packet. All application materials should be single-sided. Please include your e-mail address on your application as applicants may be notified regarding their application status via e-mail.

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No fax or e-mail materials accepted.

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P.O. Box 1580, San Luis Obispo, CA 93406

San Luis Obispo County Community Foundation Street Address:
(for drop-off materials only)

1401 Higuera Street, San Luis Obispo, CA 93401

Phone Number: (805) 543-2323

KELLY McADAMS MEMORIAL SCHOLARSHIP APPLICATION



<u>For Office Use Only</u>
Date Received: _____
<input type="checkbox"/> Application/Certification
<input type="checkbox"/> Personal Statement/Essay
<input type="checkbox"/> Honors/Activities/Empl. Sheet
<input type="checkbox"/> Complete Financial Statement
<input type="checkbox"/> Two Recommendation Letters

APPLICATION DEADLINE – February 12, 2010

All materials must be received by February 12, 2010 or earlier, or must be submitted to the Foundation office by 5:00 pm on February 12, 2010. No fax or e-mail materials accepted.

READ THE INSTRUCTIONS BEFORE STARTING THIS FORM

Name: _____
(Last, First, Middle Initial)

Social Security # _____

Permanent Telephone: _____

Cell/Apt/Dorm Telephone: _____

E-mail: _____

Permanent Address:

(all mailings will be sent to permanent address)

Street Address

City, State, Zip Code

Apt./Dorm Address at College:

(high school seniors leave this blank)

Street Address (if same as permanent address, write "same")

City, State, Zip Code

Birthdate: _____ Gender: Male Female

Marital Status: Single Married Separated Divorced Widowed

Nearest relative not living with you:

Relationship to you: _____
(Do not list a parent living at your permanent address)

Name

Address

City, State, Zip

Recommendations:

List the names of the 2 people who will be submitting your required recommendation letters.

Academic: _____

Employer/Supervisor/Academic: _____

(NOTE: if you are not employed, see Application Instructions sheet for directions – this item is still required)

How did you hear about the scholarship?

List all current and past junior high schools, high schools and colleges: (whether a degree was received or not)

School/College:	Dates of Attendance:	Degree:
_____	_____	_____
_____	_____	_____
_____	_____	_____

Have you received any other scholarship from the San Luis Obispo County Community Foundation? If yes, when? _____

How long have you lived in San Luis Obispo County?: _____

College Class in Fall 2010 (*next academic year*)

Freshman Sophomore

Colleges/Vocational Schools to which you have applied, or will apply, in order of preference:

(If you are a college student continuing at the same school, list that college here)

1. _____
2. _____
3. _____
4. _____

Expected Date of College/Vocational School Graduation: _____

Proposed Major: _____
(if you are undecided, please write "undecided" – do not leave blank)

Proposed Career: _____

What plans have you made for financing your college education? _____

CERTIFICATION – YOU MUST READ AND SIGN BELOW: (*Application is not valid without signature*)

I certify that all information submitted in the application materials is true and correct. I agree to provide all statements or documents requested, and I understand that failure to provide these documents will result in termination of my application. I agree that the San Luis Obispo County Community Foundation may forward my name and information from my application to individuals or groups that may be considering me for financial assistance, and for media and public relations purposes.

Date:

Applicant's Signature:

ACADEMIC HONORS

List most recent first. If necessary, attach an additional 8 1/2" x 11" sheet.

Honor: _____	Date: _____
Honor: _____	Date: _____
Honor: _____	Date: _____
Honor: _____	Date: _____
Honor: _____	Date: _____

ON-CAMPUS ACTIVITIES

List most recent first. Please include all on-campus clubs, organizations, sports and activities that you have participated in, what position you held, activities involved in, honors received, and your role, effect and contributions to the organization. If necessary, attach an additional 8 1/2" x 11" sheet.

Organization or Activity	Type of Participation	Honors Received	Position/Office
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Volunteer Activities

List most recent first. Include all volunteer activities which demonstrate your Kiwanis type leadership service to children. If necessary, attach an additional 8 1/2" x 11" sheet

Organization or Activity	Type of Participation	Dates of Participation	Position Held
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

EMPLOYMENT HISTORY

List all employment, including Holiday, Summer, and Temporary jobs. List most recent job first.

Employer/Business	Job Responsibility/Title	Hrs/wk	Dates Employed
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

FINANCIAL STATEMENT

To prepare your financial statement please use the College Board's Estimated Family Contribution (EFC) Calculator, Institutional Method. The calculator can be found at:

http://apps.collegeboard.com/fincalc/efc_status.jsp

A link to the College Board's EFC Calculator can also be found on the San Luis Obispo County Community Foundation's website (www.slocf.org) on the "Grants and Scholarships" page.

The EFC Calculator will ask you a series of questions regarding your family and your finances.

When asked which method to use, please use the Institutional Method.

When you have completed the EFC Calculator print two items:

- 1. Print the final summary "Results" page.**
- 2. Print the "Results: Show Detail" page.**

Also complete the following information. SIGNATURES ARE REQUIRED to complete the financial statement page.

Student Social Security Number: _____

From Institutional Methodology Results:

Parents' Contribution for Student: _____ **Student's Contribution:** _____

Total Estimated Institutional Methodology (IM) Contribution: _____

Mother's Occupation and Employer: _____

Father's Occupation and Employer: _____

Student Signature

Mother/Stepmother's Signature*

Father/Stepfather's Signature*

Spouse's Signature**

*Dependent students only

**Independent students if applicable

Submit a copy of the **FIRST TWO PAGES OF YOUR PARENT'S 2009 FEDERAL TAX RETURN**. This must be submitted as soon as possible, but **no later than April 15, 2010**. If you are 24 years of age or older, or have children, or are married, then submit your own 2009 federal tax return instead.

Please place in a sealed envelope and return to applicant or mail to:

San Luis Obispo County Community Foundation

P.O. Box 1580, San Luis Obispo, CA 93406

Phone (805) 543-2323 Fax (805) 543-2346

ACADEMIC LETTER OF RECOMMENDATION

Name of Applicant: _____
Print Clearly

To the Instructor: Thank you for acting as a reference for the above named applicant. Please take the time necessary to complete this form so that the applicant and the Selection Committee will have the benefit of your appraisal. Note: a parent or relative may not be used as a reference.

In what context have you known the applicant? _____

How long have you known the applicant? _____

Comments: **Explain why you are recommending the applicant. Use a separate sheet if you wish.**

What has been the applicant's greatest strength? _____

In what areas does the applicant need improvement? _____

Overall Rating (*check one*)

____ Highly Recommended ____ Recommended ____ Recommended with Reservation

Your signature: _____ Date: _____

Your Name and Title (*print*) _____

Your Institution _____ Phone: _____

DEADLINE: February 12, 2010
(postmark is acceptable)

Please place this form in a sealed envelope
and return it to the applicant.

SCHOOL/COMMUNITY SERVICE LETTER OF RECOMMENDATION

Name of Applicant: _____
Print Clearly

To the Community Member*: Thank you for acting as a reference for the above named applicant. Please take the time necessary to complete this form so that the applicant and the Selection Committee will have the benefit of your appraisal of his/her leadership volunteerism exhibited in their work with children. Note: a parent or relative may not be used as a reference.

When was the applicant supervised by you? _____ In what capacity? _____

What was your relationship to the applicant?

Comments: Explain why you are recommending the applicant. Use a separate sheet if you wish.

What has been the applicant's greatest strength? _____

In what areas does the applicant need improvement? _____

WORK HABITS:

____ Superior ____ Very Good ____ Good ____ Average ____ Below Average

Your signature: _____ Date: _____

Your Name and Title (*print*) _____

Company Name _____ Phone: _____

DEADLINE: March 12, 2010
(*postmark is acceptable*)

* If a school volunteer activity the letter should be written by the organization this school activity served.

HIGH SCHOOL TRANSCRIPT REQUEST FORM
San Luis Obispo County Community Foundation

Name of Applicant: _____
Print Clearly

To all applicants:

Complete this form and give it to your high school registrar's office. High school transcripts are required for all applicants, regardless of your age or grade level.

Note for high school seniors: Transcript must include all courses from your 10th and 11th grade years plus any SAT scores. After you submit this form to your high school registrar's office, the registrar will mail your transcript to the San Luis Obispo County Community Foundation. If your high school has not recorded your SAT scores on your transcript, then submit to the SLO County Community Foundation a copy of the SAT score report you received at home or online.

TO THE REGISTRAR:

Please mail the high school transcript for this student, **complete with any and/or all SAT or ACT scores,** to:

San Luis Obispo County Community Foundation
P.O. Box 1580
San Luis Obispo, CA 93406

Thank you for your promptness in responding to this request.

Student Name: _____ Birthdate: _____

Current grade: _____ **OR:** Year graduated: _____ **OR** withdrew: _____

HIGH SCHOOL SENIORS: List here the subjects that you are now taking in the Fall, and those you plan to take in the Spring term. List correct titles and show the level (for instance, "Spanish 5").

FALL TERM(S)

SPRING TERM(S)

1. _____ 1. _____

2. _____ 2. _____

3. _____ 3. _____

4. _____ 4. _____

5. _____ 5. _____

6. _____ 6. _____