

 **2023 JOHN & OLIVE ADAMS FOUNDATION AWARD**
Scholarship Application

THE PROGRAM	The John and Olive Adams Foundation will award scholarships to qualifying students who plan to further their education at a college or university accredited by the Northwest Commission of Colleges and Universities within the state of Idaho. This is a renewable scholarship for up to four years while enrolled in a qualifying institution. Applicant must be a current high school senior and reside in Bonneville County . The scholarship is intended for students who plan to study in the broad fields of physical science or social science .
SELECTION CRITERIA	The recipient must qualify under at least one of the following: <ul style="list-style-type: none"> • Top 20% of graduating class • 24 on ACT or 1110 SAT • Cumulative GPA of 3.5 or higher
APPLICATION PROCEDURE	Please submit two complete applications (original and a copy) that include all of the following: <ul style="list-style-type: none"> • Complete signed and initialed application. • Two letters of recommendation. (One must be from a school official, teacher or counselor) • A personal statement of no more than two double spaced pages.
PERSONAL STATEMENT	Your personal statement essay should address the following: <ul style="list-style-type: none"> • What are your educational goals and how will this scholarship help you to attain them? • Why did you choose the university you will attend? • How will your education contribute positively to your potential employment and the community at large? • Describe any school clubs, extracurricular activities, community service, etc. that you have been involved in. • Please provide any additional information that you would like the Selection Committee to consider.
LETTERS OF RECOMMENDATION	Letters of recommendation should address the following: <ul style="list-style-type: none"> • Does the student have noted character strengths and does the writer include specific examples? • Does the letter address the applicant's academic achievement and potential for future success? • Does the letter indicate how the student contributes to their school and community in a positive way?

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PERSONAL INFORMATION

First Name _____ MI _____ Last Name _____

Date of birth _____

Mailing Address _____

City/State/Zip _____

Primary Phone _____ Secondary Phone _____

Applicant E-mail Address _____ (please no school email)

Parent E-mail Address _____

Current High School _____

Cumulative High School GPA _____ Weighted or Unweighted (Circle one)

ACT Score _____ OR SAT Score _____

Verification of GPA and Scores

Counselor Name _____ Counselor Initials _____

I certify that the information provided on this application is true and correct to the best of my knowledge. I give my consent to forward information regarding my academic records to the scholarship committee and to the appropriate individuals for the purpose consideration and selection.

Applicant's Signature _____ Date _____

By signing below, I indicate I have reviewed the information on my child's application and have found it to be correct. I hereby give my consent for my child to be considered for this award.

Parent's Signature _____ Date _____


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INTENDED COURSE OF STUDY	Which areas of physical or social science do you intend to study? Which colleges or universities are you considering?
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APPLICATION SUBMISSION	Completed applications must be received by Wednesday, February 8, 2023 . Please submit to your high school College and Career Advisor or mail to: <div style="text-align: right;"> Adams Foundation Application c/o Mayors' Scholarship Fund PO Box 2323, Idaho Falls ID 83403 </div>
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NOTIFICATION

Scholarship recipients will be notified by phone following application evaluations in February of 2023.

TERMS AND CONDITIONS

I understand that If I receive a scholarship, I agree to fulfill certain obligations related to the scholarship including:

- Attending the photo and video shoot in March in preparation for the awards event.
- Attending the Awards event on **April 5, 2023**. Details will be provided.
- Maintaining satisfactory academic progress and academic eligibility.
- Communicating changes in my academic status, contact information, and academic plans to the Foundation in a timely manner.

I am aware that failure to meet these obligations could result in a loss of my scholarship award.

_____ Initials & Date

STATISTICAL DATA

OPTIONAL INFORMATION

(Check all that apply— for statistical record purposes only)

- | | | |
|---------------------------------|---|--|
| <input type="checkbox"/> Male | <input type="checkbox"/> Asian | <input type="checkbox"/> Native American |
| <input type="checkbox"/> Female | <input type="checkbox"/> African American | <input type="checkbox"/> White/Caucasian |
| <input type="checkbox"/> Latino | <input type="checkbox"/> Other | |