



Mayor's Scholarship Fund *Lighting the Path*

2018 IDAHO FALLS MAYOR'S SENIOR SCHOLARSHIP

THE PROGRAM

The Mayor's Scholarship Fund was established to provide financial assistance to Idaho Falls students who plan to pursue a post-high school education. Awards can only be used at an accredited post secondary school or training program within the State of Idaho or for US military education programs. Funds for these scholarships and awards are made possible through generous voluntary contributions from citizens and corporate and business sponsors. The ***Senior Scholarship*** is for graduating seniors. Funds must be requested within four years of high school graduation or equivalent.

ELIGIBILITY

There are three ways to qualify for this scholarship: 1) be a resident of Idaho Falls; 2) attend an Idaho Falls School District 91 or Bonneville School District 93 school; or 3) be enrolled in one of the programs of the Eastern Idaho Professional/Technical High School.

APPLICATION

To apply, students must submit the following:

- A. A completed application form with parent or guardian signature
- B. A Parent/Guardian Information form
- C. A Personal Information form
- D. A Personal Essay form
- E. A Community Essay form
- F. One signed Letter of Recommendation form

SELECTION OF RECIPIENTS

Eligible applicants will be blindly evaluated on the basis of information supplied. Emphasis will be placed upon student GPA (3.0-3.5 target), financial need, school/community involvement, citizenship, and future promise. All applicants will be notified of the results prior to the Scholarship Awards ceremony to be held on March 28th, 2018. ***Award recipients and their parents or guardians will be guests at the awards ceremony and are expected to attend this and all other scholarship program events.***

DUE DATE

Applications are available from all District 91 and 93 guidance counselors, from the Districts 91 and 93 Administrative Offices, and on the Mayor's Scholarship Fund website mayorsscholarshipfund.org. Applications are **due Wednesday, February 7th 2018**. They may be submitted to a guidance counselor no later than the close of school, or to the District 91 or 93 Administrative Offices no later than **4:00 p.m. on February 7th, 2018**.

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APPLICATION INSTRUCTIONS AND CHECKLIST

Dear Student,

Thank you for your interest in the Idaho Falls Mayor's Scholarship Program. We are delighted you are applying, because obtaining an education is essential to being successful and making a difference—in your own life and in the lives of others. We commend you for your determination to continue your education and the academic achievement you have already attained.

Please be thorough in completing this application. You are responsible for making sure all the forms are filled out properly and submitted on time. Use the checklist below to help you complete the application. Remember, your application is due **Wednesday, February 7th, 2018**.

Best wishes,



Mayor Rebecca Casper

General Application Instructions: Fill out the application completely. Please type, print (preferred), or complete in ink. Answer all questions thoroughly and thoughtfully.

- My **school counselor** has verified my GPA and initialed on the appropriate line.
- All forms are signed as needed by both student and parent or guardian.
- I have included **one** letter of recommendation from a teacher, counselor, coach, ecclesiastical leader, or other influential adult.
- I have answered each question completely and have not written on the backside of any page.
- I have reviewed my application with a parent, teacher, counselor, or other informed adult.
- I have proofread this application.
- I will submit **2 single-side, stapled copies** of this application (do not include cover sheet or instructions).

Incomplete applications will be not be considered.

DUE FEBRUARY 7TH, 2018

Note: If selected, you will be required to participate in all Mayors' Scholarship Fund Events including the video/photo shoot February 27th & 28th and the event on March 28th. You may also be asked to provide proof of your eligibility before claiming your award.

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GENERAL INFORMATION

(Please print or type)

Name _____
Last First Middle

Address _____
Street City State Zip

Telephone (Home) _____ (Other) _____

Parent or Guardian Name _____ Parent Phone _____

Student Email _____ Student Date of Birth _____

School _____ GPA _____ Counselor Verification/Initials _____

SAT score _____ ACT score _____ Compass score _____

- Check all that apply:
- I live in the city of Idaho Falls.
 - I am a student in School Districts 91 or 93.
 - I am enrolled in Professional/Technical High School.
 - I am home-schooled.

How did you hear about this Scholarship Program? _____

SIGNATURES

By signing below, I affirm this application is true and complete to the best of my knowledge. If selected, I agree to participate in all Mayors' Scholarship Fund Events.

Student 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/Guardian Signature _____ Date _____

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 _____ |

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PARENT/GUARDIAN INFORMATION

FINANCIAL INFORMATION – PLEASE COMPLETE ALL QUESTIONS

Marital Status of Parent(s) ___Single ___Married ___Divorced ___Widow

Whom does the applicant live with 6+ months during the calendar year? ___Father ___Mother ___Both

Please list Annual Income for both parents Enter the amount from your 2016 Form 1040 line 37, 1040A line 21 or 1040EZ line 6. \$ _____

How many family members (including parents) received at least 50% of their support from this income in 2016? \$ _____

Total Assets - Enter the total assets excluding the primary residence. **This is all "financial investments," i.e., Checking, Savings, Money Market, CD's, Treasury Bills, Bonds and Notes, Stocks, Bonds, Mutual Funds , additional Real Estate, and Trust Funds. Do not include any IRA/401K/403B.** \$ _____

After taking into account home and household expenses as well as other financial and legal obligations, how much will the parents be able to contribute toward the applicant's educational expenses in the 2018-2019 school year? \$ _____

Please list the value of any other educational scholarships (or financial aid for higher education) the applicant may be receiving in the 2018-2019 school year. \$ _____

How many college students, including the applicant, will you be supporting in the 2018-2019 school year? _____

Please explain any extraordinary or extenuating circumstances (family, medical, or other financial aid-related issues, etc.) that will impact the parents ability to contribute financially to the applicants education goals in the coming year.

PARENT OR GUARDIAN SIGNATURE

By signing below, I affirm that the foregoing is true and complete to the best of my knowledge.

Parent or Guardian Name(s) _____

Parent E-mail: _____

Daytime Phone(s): _____

Signature _____ Date _____

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FUTURE EDUCATION PLANS

*(Recipients of scholarship **must** attend an accredited institution in Idaho or a US military education program)*

Idaho colleges and universities you are considering:

Fields of study that interest you **(From 1 to 5 rank your top choices):**

- | | | | |
|---|--|---|--|
| <input type="checkbox"/> Aviation/Pilot | <input type="checkbox"/> Engineering | <input type="checkbox"/> Mathematics | <input type="checkbox"/> Computers/Technology |
| <input type="checkbox"/> Pre-Medical/Dental | <input type="checkbox"/> Biology | <input type="checkbox"/> Graphic Arts | <input type="checkbox"/> Economics |
| <input type="checkbox"/> Fine Arts/Music | <input type="checkbox"/> Communications | <input type="checkbox"/> Language Arts | <input type="checkbox"/> English/Humanities |
| <input type="checkbox"/> Pre-law | <input type="checkbox"/> Political Science | <input type="checkbox"/> Psychology | <input type="checkbox"/> Military Science (ROTC) |
| <input type="checkbox"/> Other Social Science | <input type="checkbox"/> Education | <input type="checkbox"/> Business/Pre-MBA | |

Others: _____

PERSONAL INFORMATION AND EXPERIENCES

Please list your leadership experiences, school activities, outside activities, work experience, community service, etc. Include any other ways you contribute to your school, home, church, and community.

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ADULT LETTER OF RECOMMENDATION

Please assess the applicant's character and strengths and how well the applicant is prepared to pursue his/her post-secondary education plans. We are interested in the applicant's potential for making positive contributions, intellectual promise, motivation, relative level of maturity, leadership potential, capacity for growth, special talents, etc. This information will be used to differentiate the student from others applying for this award. *(You may attach a separate, typed sheet if desired. Please complete the signature box below.)*

Position/Title/Organization _____ Daytime Phone _____

Print Name _____ Relationship to Applicant _____

Signature _____ Date _____