



Kosciusko REMC

John H. Anglin Memorial Scholarship GUIDELINES

Kosciusko REMC will award six \$1,000 John H. Anglin scholarships to specially selected high school seniors or current college or graduate students. Scholarships are awarded based on academic achievement, financial need, community involvement, and leadership skills.

ELIGIBILITY

- Available to any Kosciusko REMC member in good standing, or dependent of a Kosciusko REMC member in good standing.
- Available to graduating high school seniors, current college students, adults returning to college or entering a graduate or post-graduate program. A maximum of two scholarships will be awarded to non-traditional/ graduate/ post-graduate students.
- Must be a currently student or entering an accredited college or university (two or four year).
- Applicant may apply as often as desired, but may only receive a Kosciusko REMC scholarship once.
- Kosciusko REMC's Board of Directors, employees and their immediate family members are not eligible to apply.
- Applications must be received **by 5:00 p.m. on Friday, April 28, 2017.** Applications may be delivered in person to the Kosciusko REMC office or mailed to:

Kosciusko REMC
Attn: Jennifer Barger
370 South, 250 East
Warsaw, IN 46582

RECIPIENT REQUIREMENTS

- Must maintain at least a 2.50 cumulative GPA on a 4.0 scale.
- Must provide proof of enrollment at the beginning of each semester, as well as proof of grades at the end of each semester.
- Must apply the scholarship money toward tuition and fees.

AWARD INFORMATION

- Each scholarship will be broken into two increments, one paid at the beginning of each semester.
- Applications will be submitted to the selection committee and graded based on financial need, educational achievement, community involvement and educational goals.
- Applicants selected for the second round of judging must also participate in an interview and will be contacted to make such arrangements if chosen.



Kosciusko REMC
 John H. Anglin Memorial Scholarship
APPLICATION

2017/2018 SCHOLARSHIP APPLICATION AFFIDAVIT

I, _____, hereby agree that
(applicant's name)
 the attached application submitted to Kosciusko REMC has been executed accurately and completely, to the best of my ability and knowledge, and submitted to Kosciusko REMC by the designated deadline of **Friday, April 28, 2017.** I also recognize that if I am selected for this scholarship, I must maintain a 2.50 (out of 4.0) GPA and provide proof of my grades, as well as my enrollment for the semester. I am also aware that any funds received from this scholarship must be applied to tuition and fees at a two or four year, accredited institution.

| FOR OFFICE USE ONLY | |
|--------------------------|--------------------------------|
| <input type="checkbox"/> | certified membership |
| <input type="checkbox"/> | certified dependency to member |
| <input type="checkbox"/> | essay |
| <input type="checkbox"/> | FAFSA |
| <input type="checkbox"/> | transcript /resume |
| <input type="checkbox"/> | recommendation letters |

applicant's signature

date

APPLICATIONS MUST CONTAIN THE FOLLOWING IN ORDER TO BE CONSIDERED:

- _____ Completed scholarship application, blanks notated by "N/A"
- _____ High school or college transcript- **Current High School/College Students Only**
- _____ Resume or outline of work history-**Non-Traditional/Grad/Post-Grad Students Only**
- _____ One-page typed personal essay: Recount an act of community service/ leadership in which you were involved and explain how it impacted you.
- _____ One 3"x5" (or smaller) photograph to be used for publicity purposes (**no photocopies**)
- _____ Two letters of recommendation: 1) From a teacher you've had; 2) From a leader of a club/group/organization of which you are a part, describing your community involvement.

**All items submitted become the property of Kosciusko REMC and will not be returned. All information will be kept strictly confidential and used for judging purposes only.*



Kosciusko REMC

GENERAL INFORMATION

Name: _____

SSN: ____ - ____ - _____

Address: _____

City: _____ State: _____ Zip: _____

Cell Phone: _____ Home Phone: _____

E-mail: _____

Age: _____ Date of Birth: _____ Place of Birth: _____

Parents/Guardians Names (if applicable): _____

Name & address under which the account is billed:

Name: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Account Number: _____

Your relationship to member: _____



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PART I – SCHOOL INFORMATION (COMPLETE A, B, OR C)

A. GRADUATING HIGH SCHOOL SENIOR

Name of High School: _____

College or University Plans (1st choice): _____

(2nd choice): _____

Intended Major: _____

B. RETURNING COLLEGE STUDENT

Name of College: _____

Major: _____

C. NON-TRADITIONAL/GRADUATE/POST-GRAD STUDENT

Most Recent Degree Earned: _____

From Where: _____

College or University Plans: _____

Intended Course of Study: _____



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PART II – FINANCIAL INFORMATION

Total Household Income:

| | |
|----------------------------|---------------------------|
| _____ under \$20,000 | _____ \$20,000 - \$30,000 |
| _____ \$30,000 - \$40,000 | _____ \$40,000 - \$50,000 |
| _____ \$50,000 - \$60,000 | _____ \$60,000 - \$70,000 |
| _____ \$70,000 - \$80,000 | _____ \$80,000 - \$90,000 |
| _____ \$90,000 - \$100,000 | _____ over \$100,000 |

Does applicant have a job now? _____

Hours per week: _____

Does applicant plan to work while attending college? _____

Hours per week: _____

Estimated cost of fall & spring semesters at top college choices:

Please list all possible sources of financial aid or anticipated funding for your college tuition and supplies (i.e. family support, grants, student loans, scholarships, etc.) and indicate status:

| <u>Source</u> | <u>Amount per semester</u> | <u>Pending</u> | <u>Approved</u> |
|---------------|----------------------------|----------------|-----------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

Please list ages of other dependents (i.e. siblings or children) in your home and indicate if and where they attend high school, college or other:

Example: Brother, 21, XYZ College



PART III – EXTRACURRICULAR & COMMUNITY ACTIVITIES

Please list your school-related and/or community activities/honors:

| <u>Activity</u> | <u>Dates</u> | <u>Responsibilities</u> |
|-----------------|--------------|-------------------------|
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Please use other side of page if necessary.
For questions, please contact Jennifer Barger at Kosciusko REMC at
574.267.6331 or jbarger@krenc.com.
Thank you for taking the time to carefully complete this application.