

Kiwanis Club of Shorewood P.O. Box 87 St. Clair Shores, MI 48080

SCHOLARSHIP APPLICATION

CRITERIA:

To be eligible to apply and compete for a scholarship, applicants must meet all the following criteria:

- A) Applicants must be graduating high school seniors with plans to attend an accredited college or university and working toward a two- or four-year degree.
- B) High school applicants must have a cumulative GPA of at least 2.5 on a 4.0 scale.
- C) Must be a resident of St. Clair Shores, and possibly other cities due to "school of choice" policies.
- D) Return completed application to your counselor or mail to the address above no later than April 24th.

APPLICATION REVIEW:

In reviewing the scholarship applications, the Shorewood Kiwanis Scholarship Committee considers the following factors:

- A) The applicant's community service record.
- B) The applicant's academic record, school stamped transcript. C) The applicant's participation in extracurricular activities
- D) The applicant's service in Key Club (if any): years_____; positions held_____
- E) The applicant's work experience.
- F) Other-extraordinary circumstances as identified in the student(s) essay to the committee
- G) The application MUST BE COMPLETED in its ENTIRETY.

If you need additional space for any of the following sections, please add additional pages as needed.

	PERSO	NAL INFORMATION
Name:		Phone:
Address:		
Date of Birth:	Е	Email Address:
Parent/Guardian Names: (Father)		(Mother)
Has your parent /guardian, or relatidate of this application?		ember of Shorewood Kiwanis for at least 12 months immediately prior to theNo
If "yes" to the above question, state	that member's name	e and relationship to you:
Name:		Relationship:
Are you currently a graduating high	school senior?	YesNo
Date of Graduation:	GPA:	Intended Degree/Major:

you are a graduating high school senior, list the colleges/universities to which you have applied and where you will be atte so, if you are selected as an awardee, please be advised the check will be made payable to you and the college/universities to edicided to attend. NAME OF INSTITUTION CITY AND STATE STATUS AWARDS AND HONORS st any scholastic awards and/or honors you have received: AME OF AWARD/HONOR DESCRIPTION OF AWARD/HONOR DATE RECEIVED EXTRACURRICULAR ACTIVITIES st any other extracurricular activities in which you have actively participated: NATURE OF ACTIVITY DATES OF ACTIVITY	NAME OF INSTITUTION	CITY AND STATE	DATES ATTENDED
AWARDS AND HONORS any scholastic awards and/or honors you have received: ME OF AWARD/HONOR DESCRIPTION OF AWARD/HONOR DATE RECEIVED EXTRACURRICULAR ACTIVITIES any other extracurricular activities in which you have actively participated:	o, if you are selected as an awardee, please e decided to attend.	e be advised the check will be made payable to you	u and the college/university y
any scholastic awards and/or honors you have received: ME OF AWARD/HONOR DESCRIPTION OF AWARD/HONOR DATE RECEIVED EXTRACURRICULAR ACTIVITIES any other extracurricular activities in which you have actively participated:			
AME OF AWARD/HONOR DESCRIPTION OF AWARD/HONOR DATE RECEIVED EXTRACURRICULAR ACTIVITIES t any other extracurricular activities in which you have actively participated:		AWARDS AND HONORS	
EXTRACURRICULAR ACTIVITIES t any other extracurricular activities in which you have actively participated:			
t any other extracurricular activities in which you have actively participated:	AME OF AWARD/HONOR	DESCRIPTION OF AWARD/HONOR	DATE RECEIVED
t any other extracurricular activities in which you have actively participated:			
st any other extracurricular activities in which you have actively participated:			
NATURE OF ACTIVITY DATES OF ACTIVITY	EXT	FRACURRICULAR ACTIVITIES	
	st any other extracurricular activities in which	ch you have actively participated:	DATES OF ACTIVITY

DESCRIPTION OF INVOLVEMENT	NAME OF ORGANIZATION	DATE OF SERVICE
List any work experience you have had (beg	EMPLOYMENT	
	DATE OF EMPLOYMENT	POSITION HELD
	OTHER SCHOLARSHIPS	
	OTHER SCHOLARSHIPS	
Have you been awarded any other scholarsh		
		AMOUNT AWARDED
If you answered "yes" to the above, state:	ips?YesNo	AMOUNT AWARDED
If you answered "yes" to the above, state:	ips?YesNo	AMOUNT AWARDED
If you answered "yes" to the above, state:	ips?YesNo	AMOUNT AWARDED
If you answered "yes" to the above, state:	ips?YesNo	AMOUNT AWARDED
Have you been awarded any other scholarsh If you answered "yes" to the above, state: DATE OF AWARD	ips?YesNo	AMOUNT AWARDED
If you answered "yes" to the above, state: DATE OF AWARD OTHER REQUIREMENTS:	NAME OF SCHOLARSHIP	AMOUNT AWARDED
OTHER REQUIREMENTS: Include with the application each of the follows:	NAME OF SCHOLARSHIP Dwing: ographical information about yourself; your life goal	