**KIWANIS CLUB OF TOPSAIL ISLAND AREA**

**SCHOLARSHIP APPLICATION COVER SHEET 2023**

To Be Completed by Student

**BASIC QUALIFICATION IDENTIFIERS (You MUST answer Yes to one of the following questions to apply.)**

Are you a Key Club Member in good standing for the school year 2022-2023? Yes No

Are you a graduating Senior from Dixon High School, Holly Ridge, NC with a 3.0 GPA or higher? Yes No

**Student Full Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Home Mailing Address** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Mobile Number** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Email** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**High School Name & Address** Dixon High School, 160 Dixon School Road, Holly Ridge, NC 28445

**College You Plan to Attend (Name and Address of Financial Aid Office)** Scholarship funds are a one-time award and will be disbursed to the Student Aid Office of the winner’s chosen institution of higher learning.

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College Student I.D. Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Can NOT be left blank.)

APPLICANT CERTIFICATION

*I certify that the information I have provided on this application is true and correct to the best of my knowledge and that any accompanying examples of my work represent my original effort. My signature indicates that I am at least 18 years of age and give permission for Kiwanis to use my name, and photo, on social media and newsprint to publicize my award.*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Signature Date

TO BE COMPLETED BY A PARENT/LEGAL GUARDIAN (Must be signed if student is under 18 years of age.)

*I certify that I have read all contents of this application. My signature indicates that I am the parent or legal guardian of a student who is under the age of 18 years of age.*

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Parent/Legal Guardian Signature Date

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Printed Name of Parent/Legal Guardian

TO BE COMPLETED BY GUIDANCE COUNSELOR

*I certify that the applicant named on this application has a 3.0 or higher GPA for all courses attempted. Transcript attached.*

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Signature of Guidance Counselor Date

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Printed Name of Guidance Counselor

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Daytime Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TO BE COMPLETED BY KEY CLUB ADVISOR

*I certify that the applicant named on this application is a Key Club Member in good standing for this school year. Verified Community Service Hour Log attached.*

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Signature of Guidance Counselor Date

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Printed Name of Guidance Counselor

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Daytime Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Topsail Island Area Kiwanis Scholarship Information and Application Procedures 2023**

The Kiwanis Club of Topsail Island Area, continuing its long-standing commitment to the young people of the communities we serve, annually offers two $1,500 scholarships to Dixon High School graduating seniors with at least a 3.0 GPA or higher in all courses attempted.

These scholarships are awarded to recognize academic achievement, community service, leadership, and the possibility of financial need. Funding for these scholarships comes from fund-raising activities conducted throughout the year. The ***Kiwanis Club of Topsail Island Area*** and the ***Topsail Kiwanis Foundation*** are proud to work jointly to support these annual scholarships.

Scholarship funds are a one-time award and will be disbursed to the Student Aid Office of the winner’s chosen institution of higher learning.

1. **Description of the Scholarships:**
2. Two $1,500.00 one-time scholarships, paid directly to your college financial aid office, will be awarded to a Dixon High School graduating senior with a GPA of 3.0 or higher, ***and*** that is a Key Club Member in good standing for the school year.
3. **Scholarship Criteria:**
4. The applicant will have taken part in both school and community activities that show outstanding community service. Yes \_\_\_\_ No \_\_\_
5. The applicant will have taken part in both school and community activities that demonstrate outstanding leadership. Yes \_\_\_ No \_\_\_
6. The applicant will have proven academic success and have at least a 3.0 or higher GPA for all courses attempted. Yes \_\_\_ No \_\_\_
7. **Conditions of Eligibility:**
8. Must be a graduating senior at Dixon High School with at least a GPA of 3.0 or higher for all courses attempted.
9. Must complete and email all application materials and supporting documentation to Scholarship Committee Chair Lisa Brown, on or before Friday, April 11, 2023, by 3 PM. Please email application and supporting documentation to [lmbrown1825@yahoo.com](mailto:lmbrown1825@yahoo.com). The *Subject Line* should read: **Kiwanis Scholarship Application – Your Last Name.**
10. **Method of Selection:**
11. The scholarship award will be made based on community service, leadership activities, academic performance, and a written essay.
12. The Scholarship Selection Committee will select the winners.
13. Scholarship award winners will be announced at the school’s Senior Award Ceremony in May 2023.
14. The official Kiwanis Award Presentation will be conducted at a special Kiwanis reception (currently scheduled for May 16). *This event will comply with State of North Carolina COVID restrictions at the time.*

**Application Outline and Checklist**

1. **Community Service and Leadership**
   1. Attach a list of school and community involvement activities that demonstrates outstanding community service and leadership over the last four years. Use timesheets and logs to list your activities.
2. **Essay Topic - How I have impacted my school and/or my community through my participation in Community Service** (Essay will count more than 50% of the award criteria)
   1. The service activity/activities you participated in
   2. What your role was in the service activity/activities
   3. What you learned as a result of your experience
   4. How you made a difference – what was the impact to the community and to yourself
3. **Reference/Recommendation Letters**
   1. Must provide two (2) written references that attest to your commitment to your community as well as describing your leadership skills.
      1. One must be from a faculty member
      2. One must be from a person (not a family member) other than a faculty member, who has supervised you in your leadership or service role
4. **School Transcript**
   1. Attach a copy of your official school transcript.
5. **College Acceptance**
   1. Attach a copy of your college acceptance letter in which you enrolled for receipt of funds.

If you have any questions, please contact Scholarship Chair Lisa Brown at 910-541-0406 or by email to [lmbrown1825@yahoo.com](mailto:lmbrown1825@yahoo.com).