

The Community Foundation of Howard County, Inc.



of Howard County

Danny M. Keating Sr. Memorial Scholarship Application Form

- For qualified students graduating or who have graduated from Taylor High School, who are or will be enrolled in an accredited educational institution for a minimum of one year. Recipients must have a “C” average or higher, participated in any varsity (sport or sports), and earned a minimum of one varsity letter. The scholarship award(s) shall be made based on the following criteria:
 - (1) Exemplary behavior as an athlete and as an individual (on and off the playing fields at Taylor High School;
 - (2) High moral character;
 - (3) Excellent mental attitude;
 - (4) Leadership;
 - (5) A “C” or higher grade average; and
 - (6) Recommendation from the Taylor Athletic Director or coach of the sport student participated in.

Please complete and return this form by March 23, 2012 to:

**Community Foundation of Howard County, Inc.
Attn: Danny M. Keating Sr. Memorial Scholarship
215 W. Sycamore St.
Kokomo, IN 46901**

If you have questions, you may contact the Foundation office by phone at:
(765) 454-7298 or e-mail kim@cfhoward.org
Web Site: www.cfhoward.org

(PLEASE TYPE OR PRINT THE FOLLOWING DATA)

Personal Profile

Name _____

Mailing Address _____

City _____ State _____ Zip _____ Phone (____) _____

Date of Birth ___ / ___ / ___ E-mail Address _____ Cell Phone (____) _____

Name of father/stepfather/guardian _____

Employer _____ Position _____

Address if different from student's _____

Name of mother/stepmother/guardian _____

Employer _____ Position _____

Address if different from student's _____

If applicable, please complete the following:

Spouse _____ Number of Children _____

Employer _____ Position _____

Check if applicable ___ Father deceased ___ Mother deceased ___ Parents divorced

Family Information

Number of brothers and sisters: Younger: _____ Older (If dependent) _____

Ages of brothers and sisters: _____

Number (including self) in post-high school education next year: _____

Financial Data for 2011

Student's Income _____ Mother's Income _____ Father's Income _____

If applicable: Stepfather's Income _____ Stepmother's Income _____

If additional questions should arise with regard to the financial data requested, the foundation reserves the right to request for review a copy of the most recent tax return filed by the applicant, or the applicant's parents, if dependent.

Name of College and/or University (s) to which you have applied. Circle those to which you have been accepted:

Intended major course of study: _____

Scholastic Profile

High School Name _____

Applicant Ranks _____ in a class of _____ SAT/ACT _____ Written _____

Cumulative Grade Point Average _____ (4.0 scale)

School Official _____

Title _____ Phone _____

Signature _____ Date _____

Work experience - List places of employment over last 4 years.

Company	From/To	Hours per Week	Amount Earned
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Extracurricular Activities/Community Involvement - List all school, community, civic and church related activities you have participated in during past 4 years:

Activity	# of years	Activity	# of years
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Awards & Honors - List all awards and honors you have received (school & otherwise) during the last 4 years.

Goals and Aspirations (type or print in 50 words or less)
Describe your personal and educational goals including plans for your career and your future.

Application Checklist

This application for a scholarship becomes complete and valid only when completed in its entirety with all required attachments:

- Student Application
- Transcript of grades
- Letter of recommendation from Taylor Athletic Director or coach of the sport student participated in.

Forward to: Community Foundation of Howard County Inc.
Attn: Danny M. Keating, Sr. Memorial Scholarship
215 W. Sycamore St.
Kokomo, IN 46901

Certification

In submitting this application I certify that the information provided is complete and accurate to the best of my knowledge. Falsification of information may result in termination of any scholarship granted.

Applicant's signature: _____

Date: _____

Eligibility Requirements: A child, step-child, grandchild, step-grandchild, great grandchild, step-great grandchild, spouse, brother, sister, and spouses of everyone listed previously of someone who during the last five years has served as a member of the Scholarship Committee, Taylor High School staff that has been associated with the selection of scholarships awarded by the Community Foundation of Howard County, Inc., been a Board Member or a regular full-time and/or regular part-time employee of the Community Foundation of Howard County, Inc., is not eligible for scholarships awarded by the Community Foundation.