

Clark State Foundation

Scholarships

DEADLINES:

First consideration for Fall 2010 Scholarships:

MARCH 26, 2010

Second consideration for Fall 2010 Scholarships:

JULY 16, 2010

Winter 2011 Scholarships:

OCTOBER 29, 2010

Spring 2011 Scholarships:

FEBRUARY 4, 2011

Foundation Office

100 South Limestone St.

Post Office Box 570

Springfield, Ohio

45501-0570

937/328-6009

www.clarkstate.edu

Application for Academic year 2010-11



moving you forward

We want you to come to Clark State.

And we don't want cost to get in the way.

That's why we award more than 100 scholarships each year. One of them could be yours!

Several different types of scholarships are available, based upon factors like your major, your financial need or your grade point average. These scholarships are funded with donations raised from the community by the Clark State Foundation Board of Directors.

All applicants must apply for financial aid by completing the Free Application for Federal Student Aid (FAFSA).

The Scholarship Committee will review all applications and make a determination about which scholarship(s) an applicant is eligible for.

Applicants will be notified by mail regarding an award.

Tips for filling out scholarship applications.

- Be sure to complete all sections of the application. Only one completed application should be submitted.
- Proofread your application before turning it in.
- Be neat. If two applicants have similar qualifications, neatness could make the difference.
- Check to see what has to be included with the application so you allow yourself plenty of time. An incomplete application may delay the processing.
- The personal statement you write is very important. Readers look for signs that you will make good use of the money that has been donated.
- Meet the deadline.
- Your scholarship application is a reflection of how important the scholarship is to you.
- If you have questions, please contact one of these offices:
Foundation - 328-6009
Financial Aid - 328-6034
Admissions - 328-6028

**For a complete list of scholarships, contact the Foundation or
go to www.clarkstatefoundation.org**



Scholarship Application

Please print (complete all items)

You must attach the following documents:

- Official copy of transcript (Clark State students can access copies on-line)
- Personal Statement: Please type on a separate sheet and attach to the application. (We cannot process your application unless these are attached.)

A. General Information

Student's name _____

Student's address _____

City _____ State _____ Zip _____

Phone _____ Date of birth _____

Student lives with parents self guardian other County _____

E-mail _____ Soc. Sec. No. _____

Sex: Male Female Quarter and Year of entry _____

Optional: Some scholarships have been designated by donors for minority students. If you wish to be considered for these scholarships, please provide the information below. This information will not affect your eligibility for other scholarships:

African American Asian Pacific Hispanic Native American Other

Do you plan to attend full-time? Yes No

B. Academic Information

High school attended _____ Date of Graduation _____

High School grade point average _____ If GED was received, provide date _____

List names of all colleges attended:

College name	Dates of attendance	Degree	GPA
_____	_____	_____	_____
_____	_____	_____	_____

Reason for taking classes at Clark State: Transfer Personal Interest Degree/Certification

Major at Clark State _____ Cumulative grade point average _____ Hours completed _____

If your intended major is a health program that involves a petition to enter the clinical classes, where are you in this process?

- I will be/am working on requirements to petition for my program
- I have completed requirements and have petitioned to enter the program
- I have been accepted to the program and am on the waiting list
- I have been admitted to the program

C. List school/college and community activities in which you are or have been involved, honors and offices held in the past five years:

For office use

GPA _____ Major _____

Traditional Nontraditional

Full time Part time

More < 45 c.h. Less < 45 c.h.

Other _____

Scholarship _____

Amount _____

Year/Term _____

Date Awarded _____

Please mail completed application and attachments to:
Clark State Foundation
100 S. Limestone St.
Post Office Box 570
Springfield, Ohio 45501-0570

D. Employment Experiences (Include present and previous employment (within the past 5 years))

Employer	Dates: From/To	Job title	Hours per week
_____	/	_____	_____
_____	/	_____	_____
_____	/	_____	_____
_____	/	_____	_____

E. Personal Statement (Please type on a separate sheet of paper and attach to completed scholarship application.)
Please explain why you should receive a scholarship, and why it is important to you. Include information about your career and educational goals and any additional information that you believe may be helpful to the selection committee in reviewing your application.

F. Financial Information

Please check all applicable boxes:

Single Married With dependents Ward of the court Veteran

a. Total number in household: _____ (include self, children, spouse, parents, parent's dependents and other dependents)

b. Total Adjusted Gross Income for entire household for the last tax year \$ _____

c. Number in immediate family attending college at least 6 credit hours per quarter _____ (include self)

For all applicants:

How will your education be financed (be specific)?

Have you completed the Free Application for Federal Student Aid (FAFSA) and the Clark State Financial Aid Office application for the upcoming academic year? Yes No

If you have not applied for financial aid, why not?

List all of the financial aid you are currently receiving or plan to receive (grants, scholarships, loans, tuition waiver, and/or outside funding):

If the Scholarship Committee should be aware of additional considerations that may not be represented elsewhere in this application, please check the appropriate box(es) and provide a brief explanation:

recent job loss in household _____

past academic performance affecting GPA _____

other _____

By signing this application, I give permission to the Clark State Foundation to view my student records in order to verify enrollment, GPA, and financial status. If awarded a scholarship, I agree to write a thank you letter to the scholarship sponsor. I understand that academic misconduct results in forfeiting any Foundation scholarships. I authorize the release of information, other than financial, to the media and to the scholarship sponsor.

Applicant's signature _____

Date _____