



Danville / Boyle County Scholarship Foundation Inc.

Provides scholarships for local students for post-secondary education. Both traditional students and non-traditional students are eligible. Danville / Boyle County Scholarship Foundation Inc. also facilitates scholarships from other local organizations. The additional programs currently administered include: American Legion Scholarship, John Arnold Scholarship, Association of University Women Scholarship, Benjamin's Fund, and others. The amount of and number of scholarships offered each year are established by each organization. This single application covers all funding categories.

ALL students residing in Boyle County and planning to pursue post-secondary education are eligible. Students residing in Garrard, Mercer and Lincoln Counties are eligible for scholarships sponsored by Farmers National Bank. Two scholarships per county listed above are funded. No separate applications are necessary. This form covers all categories.

Please submit the following information to your Guidance Counselor by March 15th or by mail directly to:

Danville / Boyle County Scholarship Foundation Inc.
141 N. Third Street Suite 1
Danville, KY 40422

Submit the following:

1. Completed Application Data Form (page 2) and Personal Data Form (page 3).
2. Appraisal form (page 4) submitted by Appraiser (form should be mailed by Appraiser to address above)



PLEASE PRINT OR TYPE

Application for Scholarship

APPLICANT DATA

Date: _____

Mr. Ms. Name (last) (first) (middle initial) Social Security Number

Permanent Address (street) (city) (state) (zip)

Date of Birth (month/day/year) Telephone Number E-mail Address

Name of parent/guardian: _____

Is applicant or parent/guardian an active duty or reserve member of military service? Please provide details _____

Permanent mailing address of Parent/Guardian if different from applicant: (street) (city) (state) (zip) Telephone Number

SCHOOL DATA

High School Attended: _____ Graduation Date (month, year): _____

Address: (street) (city) (state) (zip) Telephone Number

Name of High School principal: _____

Post-secondary school(s) for which you anticipate applying: 4-yr. College/University V0-Tech Community College Other School(s) Plan to enroll: Less than half time Half time or more Full Time

TRANSCRIPT INFORMATION

High school seniors must have the following section completed by the appropriate school official.

Applicant ranks _____ in a class of _____ Cumulative grade point average: _____ /4.0 scale _____ /most recent semester GPA

PSAT Verbal: _____ Math: _____ SAT Verbal: _____ Math: _____ ACT Overall: _____ English: _____ Math: _____

School Official Signature Title Date Telephone Number

School Address (street) (city) (state) (zip)



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PERSONAL DATA

Applicant Name: _____

Date: _____

- Describe your work experience during the past 4 years. Indicate dates of employment in each job and approximate number of hours worked per week. List total amounts earned at each job.

	Position	Date from (mo/yr)	Date to (mo/yr)	Hours/Week	Amount Earned	

- List all school activities in which you have participated during the past 4 years (e.g. student government, music, sports, etc.). List all community activities in which you have participated without pay during the past 4 years (e.g. Red Cross, church work, volunteer work...). Indicate all special awards and honors.

Activity	No. of Years Participated	Awards, Honors, Offices

- Make a statement of your plans as they relate to your educational and career objectives and future goals.

- Please describe how and when any unusual family or personal circumstances have affected your achievement in school, work, or participation in school and community activities.



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Application Packet

APPLICANT APPRAISAL (REQUIRED)

Applicant Name: _____

Date: _____

To be completed by a high school or college counselor or advisor, an instructor or a supervisor.

APPRAISER: You have been asked to provide information in support of this application for financial aid. Please give immediate and serious attention to the following statements. When complete, please return to Danville / Boyle County Scholarship Foundation Inc. at:

141 N. Third St, Suite 1, Danville, KY 40422 by March 15th of the current school year.

The applicant's choice of a postsecondary education program is:	Extremely Appropriate	Very Appropriate	Moderately Appropriate	Not Appropriate
The applicant's achievement reflect his/her ability:	Extremely Appropriate	Very Appropriate	Moderately Appropriate	Not Appropriate
The applicant's ability to set realistic and attainable goals is:	Excellent	Good	Fair	Poor
The quality of the applicant's commitment to school and community is:	Excellent	Good	Fair	Poor
The applicant is able to seek, find and use learning resources:	Extremely Appropriate	Very Appropriate	Moderately Appropriate	Not Appropriate
The applicant demonstrates curiosity and initiative:	Extremely Appropriate	Very Appropriate	Moderately Appropriate	Not Appropriate
The applicant demonstrates good problem-solving skills, follow-through and completes tasks:	Extremely Appropriate	Very Appropriate	Moderately Appropriate	Not Appropriate
The applicant's respect for self and others is:	Excellent	Good	Fair	Poor

Comments:

Appraiser's Signature	Date	Title	Telephone Number
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Relationship to Applicant

Business Name	Address City	City	State	Zip
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PLEASE RETURN TO: 141 N. Third St, Suite 1, Danville, KY 40422 by March 15th of the current school year.