



Danville / Boyle County Scholarship Foundation Inc.

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 for the 2013-2014 school year 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 15, 2013 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 and Personal Data Form
2. Appraisal form submitted by appraiser (form should be mailed by appraiser to address above)



Danville / Boyle County Scholarship Foundation Inc.

PLEASE PRINT OR TYPE

Application for Scholarship

APPLICANT DATA

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: _____
 School(s) _____

4-yr. College/University _____
 Community College _____
 Vo-Tech _____
 Other _____

Plan to enroll: less than half time half time or more full time

OTHER AWARDS

Please list below the name and the amount of any grants or scholarships that you have been awarded or are being considered for the coming school year.

Name of Award	Amount	Granted	Pending
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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) (zip)



Danville / Boyle County Scholarship Foundation Inc.

PERSONAL DATA

Applicant Name: _____

1. 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

2. 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

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

4. 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.



Danville / Boyle County Scholarship Foundation Inc.

FINANCIAL ASSISTANCE QUESTIONNAIRE

A. Student

Mr. _____
 Ms. _____

Name (last) (first) (middle initial) Social Security Number

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

(_____) Telephone Number E-mail Address

B. Parents' Income Information

The applicant's parent(s) must complete the following section or supply a copy of the completed Free Application for Federal Student Aid (FAFSA) form. NOTE: If legally classified as an independent student, use this section to supply your (and your spouse's, if any) financial information. Indicate whether the information is from:

- Estimates based on current income information to be filed by April 15, 2013.
- A completed tax return – IRS Form 1040 filing date of April 15, 2012.

1. Adjusted gross income (FORM 1040) \$ _____
2. Total number of family members living in the household and primarily supported by the reported income _____
3. Total number of family members who will be attending a postsecondary school at least half time during the 2013-2014 school year, including applicant _____

CERTIFICATION: All of the information on this form is true and complete to the best of my (our) knowledge. If asked by an authorized official of Scholarship America, I (we) agree to give proof of the information that I (we) have given on this form. I (We) realize that this proof may include a copy of my 2012 U.S. and/or state income tax return. I (We) also realize that if I (we) do not give proof when asked, the student may not receive aid.

 Parent's Signature (not required for independent student) Applicant's Signature Date

Do you have legal custody of the student? Yes No
 Is the student your dependent? Yes No



Danville / Boyle County Scholarship Foundation Inc.

APPLICANT APPRAISAL (REQUIRED)

Applicant Name _____

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, Ste 1, Danville, KY 40422 by March 15, 2013.

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 Well	Very Well	Moderately Well	Not Well
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 Well	Very Well	Moderately Well	Not Well
The applicant demonstrates curiosity and initiative	Extremely Well	Very Well	Moderately Well	Not Well
The applicant demonstrates good problem-solving skills, follow-through and completes tasks	Extremely Well	Very Well	Moderately Well	Not Well
The applicant's respect for self and others is	Excellent	Good	Fair	Poor

Comments _____

Appraiser's Signature _____ Date _____ Title _____ Telephone Number _____

Relationship to Applicant _____

Business Name _____ Address _____ City _____ State _____ Zip _____