



## Kiwanis Club of Rolling Hills Estates Scholarship Application

The Kiwanis Club of Rolling Hills Estates is pleased to offer scholarships to deserving students from our local South Bay area. The scholarship monies are allocated by the Club based upon the proceeds from fund-raising activities, including the annual Palos Verdes Marathon event, which is the second oldest, continuous-running marathon event in the United States of America.

In addition to the annual Kiwanis Club scholarships, additional scholarships are awarded in honor of outstanding former Kiwanis members. The Cliff Welsh Memorial Award is given for service to the community through Kiwanis sponsored youth programs, including Key Club and KIWINS at local high schools. The June Staudhammer Memorial Award is given to a student with evidence of a career pathway to nursing or a related medical field. Memorial awards are given when applicants meet the criteria, but may not be given every year.

The Kiwanis Club hopes to reward students who have shown special "heart" and performed to the best of their ability in high school, and it is recognized that this high level of achievement may have been maintained under difficult conditions related to family, outside endeavors, employment and other situations. The scholarship committee will consider academic merit, service and need. Students may be recognized for performing exceptional service to their school and to the community. Applications are welcomed from students planning to go to a four-year college or university as well as those planning to attend a community college or vocational program. An applicant may be called upon to be interviewed as part of the selection process.

Please follow the enclosed instructions carefully and submit all materials, as directed, by the Spring 2012 deadline.

**DEADLINE FOR SUBMISSION OF APPLICATIONS  
SPRING 2012**

April 10, 2012



## KIWANIS CLUB OF ROLLING HILLS ESTATES

### SCHOLARSHIP APPLICATION

1. Fill out this application completely. Incomplete applications will not be considered by the Scholarship Committee. This includes any and all financial information requested in order to consider an applicant for financial need. SAR's, AB 540 Waivers, and tax documents must be attached.
2. If you download the application, please complete it in Microsoft Word. If you obtain a paper copy of the application, **type** all answers, including the essay.
3. Obtain the following documents:  
 [Please note: an "Authorization for Release of Educational Records For Financial Award Application" form is attached to this packet. You may use it to obtain copies of your official records.]
  - SAT/ACT Scores;
  - Official high school transcript [1 copy official transcript]; You may submit an unofficial copy of your transcript with the application and then send a separate mailing to be received within one week of the application due date, if there is more time required by your school office.
  - Transcripts from any community college and/or other high schools.
  - One letter of recommendation from a teacher or guidance counselor; and
  - One letter of endorsement from a responsible person, **neither** related to the applicant nor affiliated with the school, who can give worthwhile opinions of the character, diligence and resolve of the applicant.
  - If you are applying for an award based upon financial need, attach a copy of your and your parent(s)' most recent Form 1040 (for the year of your scholarship application).
  - A copy of your SAR from FAFSA filing.
  - Verification of AB540 status (copy of birth certificate and waiver)
  - Authorization for release of photographs for publication in the press.
  - A Completed checklist as provided.
4. Obtain copies of other documents [optional]:
  - Community Service Certificates; and
  - Acceptance letters from institutes of higher education, professional schools or cultural education programs.
  - Photo
  - Any other awards/programs substantiating financial need.



5. Attach the documents in 2 and 3 above to your Scholarship Application. Make 1 copy of the application packet.
  
6. **Submit** the original Scholarship Application packet, one paper copy of the Application packet and an electronic copy of the Application if you completed it in Microsoft Word [on CD, IBM format] to the following address by the deadline.

**[Your completed application must be received by Kiwanis on or before the deadline].**

Kiwanis Club of Rolling Hills Estates  
P.O. Box 2856  
Palos Verdes Peninsula, CA 90274

Please note: If you are selected to receive a Kiwanis Scholarship from the Club of Rolling Hills Estates, you will be invited to attend the Kiwanis Club of RHE's annual scholarship dinner. In addition, you will be asked to keep the Club informed of your current mailing address and other contact information as you progress through your college education. The Club will be interested to learn about your progress and we will want to share the good news with all of the donors who make the scholarship program possible.



KIWANIS CLUB OF ROLLING HILLS ESTATES  
SCHOLARSHIP APPLICATION

APPLICATION FOR: [Check one or two categories, as applicable. Then clearly mark one line indicating merit/leadership only **OR** merit/leadership and financial need.]

- KIWANIS SCHOLARSHIP  
 Merit/Leadership only  
 Merit/Leadership and Financial Need
- KIWANIS CLIFF WELSH MEMORIAL AWARD (Restricted to Key Club and KIWIN applicants)  
 Merit/Leadership only  
 Merit/Leadership and Financial Need
- KIWANIS JUNE STAUDHAMMER MEMORIAL AWARD  
 Merit/Leadership only  
 Merit/Leadership and Financial Need



### SUMMARY OF CONTACT INFORMATION

<p><b>Your name</b>          [Include your favorite name, if different from your given name.]</p>	
<p><b>Email address</b></p>	
<p><b>Telephone number [include area code]</b>          Cell          Home</p>	
<p><b>Address [include zip code]</b></p>	
<p><b>High School and Grade</b></p>	
<p><b>Parent, Parents or Guardian Name(s)</b>          Give full names</p>	
<p><b>Email address(s) for each Parent or Guardian listed above.</b></p>	
<p><b>Full address for each Parent or Guardian listed above. [Include city &amp; zip code]</b></p>	
<p><b>[1] For each letter of recommendation, list:</b>          Full name and title;          Email address;          Telephone number; and          Full mailing address</p>	
<p><b>[2] For each letter of recommendation, list:</b>          Full name and title;          Email address;          Telephone number; and          Full mailing address</p>	
<p><b>Other contact information, as needed:</b></p>	



### PERSONAL INFORMATION

1. Name: \_\_\_\_\_
2. Date of Birth: \_\_\_\_\_
3. Full Names of Parent(s) or Legal Guardian: \_\_\_\_\_
4. Number and ages of brothers and sisters who will be living at home or away at school next year:  
     \_\_\_\_\_ at home                      \_\_\_\_\_ away at school/military/other
5. Live with:     \_\_\_ Mother and Father                      \_\_\_ Mother and Stepfather  
                   \_\_\_ Mother only                                      \_\_\_ Father and Stepmother  
                   \_\_\_ Father only                                      \_\_\_ Guardian / Relationship: \_\_\_\_\_  
                   \_\_\_ Other living arrangements not listed above, please explain: \_\_\_\_\_
6. Mother's Occupation: \_\_\_\_\_
7. Father's Occupation: \_\_\_\_\_
8. Guardian's Occupation, if appropriate: \_\_\_\_\_

### **PLEASE READ THE FOLLOWING CRITERIA CAREFULLY AND SELECT THE OPTION THAT BEST DESCRIBES YOUR FINANCIAL STATUS**

9. Annual Family Income: \$ \_\_\_\_\_  
     [Attach a copy of your parent(s) Form 1040 and SAR if seeking an award based upon financial need. Financial need scholarships must have income from family and student attached]  
     \_\_\_\_\_ a) If not seeking award based on financial need, please check mark here.  
                   You will not need to attach any income tax information – **only your SAR.**  
     \_\_\_\_\_ b) If AB540, please check here. Attach waiver.

### HIGH SCHOOL INFORMATION

1. Name of High School You Attend Currently: \_\_\_\_\_

If you have attended more than one high school from 9<sup>th</sup> grade on, please list those other high schools and the counselors assigned with their full telephone numbers and email addresses:



**Name, full telephone number, extension and Email address of your counselor at your current High School:**

Name:

Phone number with direct extension:

Email:

2. Grade Point Average [GPA]:

\_\_\_\_\_ Overall

\_\_\_\_\_ College Pre-Requisite Classes [A-G according to UC Guidelines.]

3. List the classes you have taken in addition to the minimum required coursework which were of particular interest to you or in addition to your college requirement classes (you may list community college courses, and/or any extracurricular courses related to culture or interests):

4. Have you taken [or are you currently taking] advanced placement or honors courses?

\_\_\_ Yes \_\_\_ No

If yes, list the AP/Honors courses and your grade in each.

What percentage of classes in your high school [junior and senior years] are entitled "Advanced Placement?"

\_\_\_\_\_ 5-10%

\_\_\_\_\_ 41-60%

\_\_\_\_\_ 11-20%

\_\_\_\_\_ 61-80%

\_\_\_\_\_ 21-40%

\_\_\_\_\_ 81-100%



5. SAT Scores: \_\_\_\_\_ Verbal \_\_\_\_\_ Math \_\_\_\_\_ Analytical

SAT II Scores: \_\_\_\_\_ Subject: \_\_\_\_\_ Subject:

ACT scores: \_\_\_\_\_ English \_\_\_\_\_ Math \_\_\_\_\_ Reading \_\_\_\_\_ Science

6. SCHOOL and/or COMMUNITY ORGANIZATIONS AND ACTIVITIES: Please list your office/title and/or contribution to each organization/group and state the offices you have held. Use a separate sheet, as needed.]

High School Clubs: [State if you were a member, what positions you held, what your responsibilities were for that office and what percent of the activities you attended for each year of membership. Please provide names of club advisors and contact information]

Athletic Teams or Clubs: [State if you were a member, what positions you held, what your responsibilities were for that office and what percent of the activities you attended for each year of membership. Please supply coach's names and contact information including email address.]

List Honors, Awards, & other scholarships you have earned: [Specify the Honor/Award, the club/society/agency making the award and the approximate date received.]

Community / Service Activities: [Be specific about your participation and the time required.]

7. Employment Record: Please include self –employment if applicable

<u>Employer</u>	<u>Position</u>	<u>Period:</u> <u>From - To</u>	<u>Hrs/Week</u>	<u>Reason for</u> <u>Leaving</u>
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8. Do you have other family or community responsibilities [such as caring for siblings or other family members, grocery shopping, food preparation or other routine duties at home], in addition to paid employment?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If Yes, describe the responsibilities and give the number of hours/week for each.



## EDUCATIONAL PLANS

1. Do you plan to attend: \_\_\_ 4 year college or university  
 \_\_\_ 2 year college  
     If yes: \_\_\_ prior to transfer to a 4 year college/university  
             \_\_\_ to earn an A.A. degree as a terminal degree  
 \_\_\_ Other educational program. If so, describe the professional or vocational type of program.
  
2. Name the educational institutions/programs to which you have applied and state why:
 

1st Choice:	Reason:
2nd Choice:	Reason:
3rd Choice:	Reason:
  
3. What will your primary course of study be?
  
4. What is your career choice [at this time]?
  
5. Have you been accepted to any school(s)? If so, please list them:  
**[Please be reminded to attach copies of acceptance letters.]**
  
  
  
  
6. Will you be living at home or away during your next school year? \_\_\_ Home \_\_\_ Away
  
7. Approximate cost for your first year of higher education?  
     \$ \_\_\_\_\_ Tuition and Fees      \$ \_\_\_\_\_ Housing/Food  
 Have you been accepted into a work study program/related on campus or other job at college?



8. How much can your parents contribute to your higher education?
- Please circle: 0%            25%            50%            75%            100%
9. Please attach your SAR (Student Aid Report) and state how much your family is expected to contribute to your education.  
\$ \_\_\_\_\_
10. Are there any special circumstances that the Scholarship Committee should be aware of with regard to your family situation or financial need?
11. What is your financial plan to pay for your first year of higher education (savings, working, loans, grants, family contributions, awards, other)?
- 11A. If AB540, please describe financial plan sustaining education already in place at the time of this Application (list scholarships already received, savings, benefactors, etc):
12. Please write a brief biography of yourself, your hobbies and interests, and discuss your long-range goals. State how you intend to reach these goals inclusive of higher education. Summarize by stating why you are deserving of a Kiwanis scholarship. [Add an additional page as needed.  
**Please limit the biography to approximately 1-2 pages or 600-800 words.]**
- ❖ **If there is anything else you believe the committee should know about you that does not fit in any of the categories asked above, please state it on a separate sheet marked “Additional Information for Consideration” and attach to the application packet. [Be careful to include your name at the top of any additional pages added to the application.]**



## CHECKLIST SCHOLARSHIP APPLICATION TO KIWANIS CLUB OF RHE

Please review and complete this checklist for all attachments.

**INCOMPLETE APPLICATIONS WILL BE REJECTED.**

- \_\_\_\_\_ **Completed Kiwanis Scholarship Application.**  
[Original with the following attachments; paper copy of original and attachments plus one electronic copy of application (completed application file or scan of application file including attachments and optional extra pages).]
- \_\_\_\_\_ **SAT and SAT II Scores, ACT Scores**
- \_\_\_\_\_ **Official high school transcript [1 official transcript]**  
[Note: include an unofficial copy of your transcript with the application if there is a delay in obtaining your official transcript. Mail the official transcript within one week of the Kiwanis scholarship deadline, to assure inclusion of your application in the review process.]
- \_\_\_\_\_ **One letter of recommendation from a school teacher or school guidance counselor AND**
- \_\_\_\_\_ **One letter of endorsement from a responsible person, neither related to the applicant nor affiliated with the school, who can give worthwhile opinions of the character, diligence and resolve of the applicant. You must use someone who knows you in either a professional or personal manner. You may use a supervisor, community leader, coach, employer or others.**
- \_\_\_\_\_ **If you are applying for an award based upon financial need, attach a copy of your and your parent(s)' most recent Form 1040 (for the year of your scholarship application).**
- \_\_\_\_\_ **A copy of your SAR from FAFSA filing**
- \_\_\_\_\_ **Verification of any employment (Your W-2, 1099, or dependent status)**
- \_\_\_\_\_ **Verification of AB540 status (copy of birth certificate and waiver)**
- \_\_\_\_\_ **Acceptance letters from institutes of higher education or professional schools**
- \_\_\_\_\_ **Community Service Certificates**
- \_\_\_\_\_ **Authorization for Release of Photographs for Publication in the Press**
- \_\_\_\_\_ **Other documentation included: Please name any additional documentation you have attached that is not categorized in the list above.**

Last revised: January 15, 2012



**AUTHORIZATION FOR RELEASE OF**  
**EDUCATIONAL RECORDS**  
**FOR FINANCIAL AWARD**

\*\*\* NOTE: In accordance with the Federal Privacy Rights of Parents and Students Act, the following signed consent is necessary for \_\_\_\_\_

Name of High School

to release student information for use in conjunction with the student's application for financial aid or awards.

The undersigned hereby consent to release by the High School of all educational records about the student, including recommendations and other such information as may be requested.

\_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed name of Student

\_\_\_\_\_  
Signature of Parent or Legal Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed name of Parent or Legal Guardian



**AUTHORIZATION FOR RELEASE OF  
PHOTOGRAPHS FOR PUBLICATION IN THE PRESS**

The following signed consent is necessary for \_\_\_\_\_.  
Student's name

The undersigned hereby consents to release any photos taken based on scholarship awards to the student from the RHE Kiwanis Club for the purpose of advertising, solicitation, documentation and/or press coverage of this process.

\_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent or Legal Guardian

\_\_\_\_\_  
Date