

## **NEAL SISTERS SCHOLARSHIP FUND**

### Instructions for Scholarship Application

1. The attached application is to be used for the Neal Sisters Scholarship Fund of the Tuscola County Community Foundation. Up to Three (3) \$2,000 scholarships will be awarded to a **graduating Caro High School senior(s) who has taken a foreign language and has demonstrated social and civic involvement and is pursuing post-secondary education.** The scholarship award will be distributed to the post-secondary school.

2. Application and required attachments must be **postmarked by March 15, 2024, to:**

**Tuscola County Community Foundation  
Neal Sisters Scholarship Fund  
P.O. Box 534  
Caro, MI 48723**

3. Applications are to be typed or legibly printed in ink and must be signed by the applicant. Applications not signed will not be considered.

4. **Provide a brief 1-2 page essay** (no longer than 2 pages, double-spaced, 12 font) addressing **one (1)** of the following:

- a. How do you think your education will help you to pursue your future goals?
- b. What is the most important insight you gained in your years in Caro Community Schools?
- c. In what way(s) do you think that your education can help to improve the human condition?
- d. Do you think that your education has enabled you to understand and respond to diversity (i.e. people of other ethnicities, races, religions cultures etc.)?

5. Submit the **original application and one official high school transcript along with seven (7) copies of each (including essay and any attachments).** Please have original printed single sided and no staples.

## NEAL SISTERS SCHOLARSHIP APPLICATION

### APPLICANT INFORMATION

Name: \_\_\_\_\_

Last

First

Middle

Permanent Address: \_\_\_\_\_

Street

City

State

Zip

Date of Birth: \_\_\_\_\_ Email: \_\_\_\_\_

Telephone: \_\_\_\_\_ Tuscola County Resident: \_\_\_\_\_ Yes \_\_\_\_\_ No

List your grade point average using a 4-pt. scale: \_\_\_\_\_ ACT / SAT Score: \_\_\_\_\_

High School: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

### FAMILY INFORMATION

Name of parent/guardian: \_\_\_\_\_ Occupation \_\_\_\_\_

Address: \_\_\_\_\_

Street

City

State

Zip

Name of parent/guardian: \_\_\_\_\_ Occupation \_\_\_\_\_

Address: \_\_\_\_\_

Street

City

State

Zip

Post-secondary school you are planning to attend: \_\_\_\_\_

Full-time student? \_\_\_\_\_ Yes \_\_\_\_\_ No If no, number of credits: \_\_\_\_\_

Major field of study: \_\_\_\_\_

How is your post-secondary education being financed? \_\_\_\_\_

Please list scholarships applied for:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Please list scholarships granted and amounts:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## SCHOOL & COMMUNITY ACTIVITIES

Using only the space below, list extracurricular, community and religious activities in which you have participated during the past 4 years. **Please list them in order of importance to you.**

Foreign Language Class Taken	Year(s)	Awards and Recognitions (if applicable)
School or Community Activity	Num. of Years	Leadership Positions, Awards and Recognitions

## WORK EXPERIENCE

Using only the space below, please list your paid work experience during the past four years, beginning with your most recent positions.

Employer	Nature of Work	Dates of Employment	Hrs./Week

## CERTIFICATION

I hereby affirm that the information provided on this form is accurate and complete to the best of my knowledge. I consent to having my name and image likeness included in public/media releases. If under 18, parent/guardian must also sign.

\_\_\_\_\_

Applicant's Signature

\_\_\_\_\_

Date

\_\_\_\_\_

Parent/Guardian Signature (if applicable)

\_\_\_\_\_

Date