Anna & Caroline Schmid Memorial Scholarship Fund

Crystal Falls Area Community Foundation an affiliate of the Dickinson Area Community Foundation



SELECTION CRITERIA

One (1) or more scholarship recipient(s) will be chosen annually from Forest Park High School. Amount of the award may be up to \$4,000 per year for a 4-year maximum. Exact award amount is determined annually based upon earnings in Fund.

Eligibility:

- 1. The student chosen must have been accepted in a 2- or 4-year program at a college or university.
- 2. The student must be a graduating Forest Park High School Senior.
- 3. A transcript of the student's high school records must be supplied demonstrating the following traits: scholarship and commitment to his or her continuing education. Grade Point Average (GPA) shall **not** be a consideration for receiving this scholarship.
- 4. The student shall have demonstrated a strong work ethic throughout their high school years and must provide an acknowledging reference letter from a teacher recognizing their "strong work ethic", and specific examples of such.
- 5. The student shall have demonstrated honesty, good citizenship and volunteerism in the community and must provide an acknowledging reference letter from a person who is familiar with the student (not family) recognizing these traits and citing specific examples of such.
- 6. Students applying for this scholarship will be asked to write an essay on a topic to be determined by the Schmid Scholarship Committee. The writing competition will be held during non-school hours and interested students will be notified of the date and time for the essay competition.
- 7. The student must attach a Personal Statement, which includes their comments on how their field of study relates to this Scholarship.
- 8. Financial need of the applicants shall also be taken into consideration.
- 9. Proof that student remains in good standing at college or university is required to renew the scholarship for the next three (3) years. Students should submit their official college transcripts for the preceding year no later than **June 30th** of each year to the Dickinson Area Community Foundation at 220 E Hughitt Street, Iron Mountain, MI 49801. (Phone: 906-774-3131; E-mail: information@dickinsonareacf.org)
- 10. <u>All applicants must adhere to Guidance Counselor deadlines</u>. *Failure to turn in your application by the due date will result in being ineligible to apply for this scholarship.*

Guidance Counselors, all completed applications must be returned to Dickinson Area Community Foundation <u>by March 15.</u>

Addendum:

A scholarship award may be revoked by the Board of Trustees because of:

- > Criminal or anti-social conduct of recipient.
- > Filing false information on application.
- > For such other good cause as the Board may, in its sole discretion, determine.

Revocation shall be by the action of a majority of the members of the Board of Trustees, and upon such revocation, any and all funds still controlled by the Board of Trustees, shall be withheld and disposed of at the discretion of the Board.



Anna & Caroline Schmid Memorial Scholarship

Crystal Falls Area Community Foundation Fund an affiliate of the Dickinson Area CommunityFoundation Completed applications must be submitted by March 15th

Date			
Full Name			
Street Address			
City ST ZIP Code			
Home & Cell Phone			
E-Mail (Required)			
In what extra-curricular activities did you participate in? (Include both in-school activities and volunteer activities outside of school)			
Did you work during the se	1 1 0		
Did you work during the sc	hool year?	If yes, how many hours/week?	
Name of college or universi	•	If yes, how many hours/week?	
	ty you plan to attend:	If yes, how many hours/week?	
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Please include the following with the application:

- 1. A personal statement which includes your comments on how your field of study relates to this scholarship.
- 2. An acknowledging reference letter from a teacher recognizing your strong work ethic with specific examples.
- 3. An acknowledging reference letter from a person who is familiar with you (not family) recognizing your honesty, good citizenships and volunteerism in the community.
- 4. A written essay on a topic to be determined by Schmid Scholarship Committee. See #6 on criteria sheet.
- 5. Copy of high school transcripts

Application Deadline

All applications need to be submitted to the guidance counselor's office by March 15th.

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand any false statements, omissions, or other misrepresentations made by me on this application may result in rejection of this application.

Name (printed)

Signature

Date

Parent Application Form

Name of parent or guardian completing this form: Home address:

Phone:

Email address:

Do you have any dependents other than your own family or other extenuating circumstances that should be considered? If yes, please explain:

Note here any statements you may wish to make which assist the scholarship selection committee in consideration of the applicant:



Agreement & Signature:

I affirm that the statements above are true and complete. I understand any false statements, omissions, or other misrepresentations made by me on this application may result in rejection of this application.

Signature of parent or guardian:

Date:

RELEASE OF INFORMATION

I hereby certify that any information needed regarding my scholarship requirements be made available to the Director of the Dickinson Area Community Foundation and the Anna & Caroline Schmid Memorial Scholarship Committee.

Signature of Applicant: Da	Date:
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