

2018-2019

RENEWAL APPLICATION

APPLICANT ELIGIBILITY REQUIREMENTS

- > non-married resident of St. Joseph County who is not financially or legally responsible for any dependents,
- > a citizen of the U.S. or have proof of pending naturalization,
- > planning to attend a properly accredited undergraduate institution full time,
- > demonstrated need for financial assistance to attend college,
- > meet the Foundation guidelines for cumulative GPA expected of students:

Sophomore	2.5	C+
Junior	2.75	B-
Senior	3.0	B

SCHOLARSHIP APPLICATION INSTRUCTIONS

Student is applying for a one-year renewable scholarship based on academic achievement and on need. Award amounts vary. Renewal is not guaranteed; you must reapply each year.

Application is also available on our website to complete and print. It cannot be submitted electronically.

Required Documents

In order for this application to be processed you must submit the following:

- The completed application
- Transcript or current grade record
- Financial Aid Award letter from your college or university
- Completed the CSS/Financial Aid PROFILE application (see below)

Required Financial Aid Forms

- By March 1st
Complete the CSS/Financial Aid PROFILE Application via the internet on the College Board website at www.collegeboard.org or <https://profileonline.collegeboard.com> Use estimated income, if necessary to meet the deadline. The code number for The Scholarship Foundation of St. Joseph County, Inc. is **0619**.

Application Submission

- Photocopy materials submitted for your records
- Assemble all required materials in a 9 x 12 envelope (do not use staples)

Mail renewal scholarship application to your Foundation Mentor by March 1, 2018.



3515 N. Main St., Suite C
Mishawaka, IN 46545
(574) 259-0522 FAX: (574) 259-0533
www.scholarshipfoundation.org

2018-2019

RENEWAL

**Application Deadline March 1, 2018
(to your Foundation Mentor)**

All information will be treated as confidential. Incomplete applications will not be considered.

Last Name	First Name	Middle Name	
Home Address	City	Zip	
County	Phone (Home)	Phone (Cell)	
E-mail address	Birth Date (mm,dd,yyyy)		
College Attending			
Present Class Standing	Freshman	Sophomore	Junior
Your Campus Address			
City	State	Zip	
Do you anticipate continuing your education at the same school you presently attend?	Yes	No	
If no, to which school will you be transferring?			

2017-18 Resources & Expenses

- 1) **Attach a copy of your most recent financial aid award letter from your college or university.**
- 2) Did you receive any private scholarships that are not listed on your financial aid award letter? If yes, list the name, amount and whether the scholarship will be renewed.

Amount	Renewable	Yes	No
Amount	Renewable	Yes	No
Amount	Renewable	Yes	No

- 3) Provide the following information about your 2017-18 expenses:

Actual Tuition & Fees	Transportation
Actual Room & Board	Personal Expenses(e.g. Laundry, clothing)
Cost of Books & Supplies	Total Costs

- 4) Do you have any other expense of which you would like to make us aware?

- 5) If your expenses exceeded your financial aid, how did you pay the difference?

- 6) Total loans **you** the **student** has borrowed including 2017-18.

2018-19 Resources & Expenses

- 1) How much do you plan to earn working this summer?
- 2) Do you anticipate your eligibility for financial aid will change significantly from the aid you received in 2017-18? Yes No

If yes, how will it change? Explain below:

Optional Special Circumstances: Please describe any special circumstances you or your family are experiencing.

REQUIRED DOCUMENTS

Financial Aid Award Letter

1) Attach a copy of your most recent financial aid award letter from your college or university.

Transcript

2) Transcript or current grade record must show university name, student name, school assigned ID, semester and cumulative GPA.



CSS/Financial Aid PROFILE (Required)

I submitted the CSS/Financial Aid PROFILE Application via the internet and included the Scholarship Foundation's **CODE NUMBER 0619** on _____ date



♦ The Scholarship Foundation often forwards applications to other area scholarship programs. Do you authorize us to share the information contained in this application with other scholarship programs? Yes No

♦ The Scholarship Foundation uses name, images, voice or video recorded images from our events for communications to the community and on our website. Do you authorize use of your name, image, voice or video recorded image? Yes No

SIGN THIS STATEMENT

We certify that all of the information reported on this statement, and all other documents, which we submitted to qualify for federal, state and institutional financial assistance is true and complete to the best of our knowledge.

The student and at least one parent or guardian must sign below.

Signature of Student _____ Date _____

Signature of Parent/Guardian _____ Date _____

Signature of Parent/Guardian _____ Date _____



THIS SECTION IS TO BE COMPLETED BY THE FOUNDATION MENTOR

Received Transcript/Current Grades Yes No Received Financial Aid Award Letter Yes No

Is there any reason the Awards Committee should not renew this scholarship? Yes No

If yes, please explain:

Foundation Mentor Signature _____