

THE CARSON SCHOLARSHIP FUND

APPLICATION DEADLINE: **MAY 3, 2017, No later than 3:00pm**

A scholarship program created by the Carson Scholarship Fund and administered by The Montgomery County Foundation, Inc. is limited to graduating high school seniors from Norristown Area High School who have been accepted to an accredited four-year college in the S.T.E.M. field. Only one scholarship per year is available. Based on funding availability and criteria, it is a possible \$10,000 scholarship.

SELECTION CRITERIA

- Applicant must be a Norristown Area High School senior preparing to graduate in the S.T.E.M. field with course work in physical sciences. The grant applies only to those students who are seeking financial aid to complete their education at a four (4) year accredited college/university and seeking a degree in the S.T.E.M. field and are fully matriculated. Graduate students are not eligible.
- All applicants must have at least a 3.0 GPA to be eligible.
- No student can apply for or receive more than one scholarship per year.
- All Scholarship recipients must be United States citizens.
- Awards of Scholarships will be made without taking into consideration race, ethnicity, religion, gender, gender preference, disability or perception of disability.
- The Scholarships are awarded based on financial need and academic performance. One Scholarship per year is available with the possibility of renewal based on need and grade point average and availability of funding of up to four (4) years. The student will need to maintain a 3.0 minimum average. Recipients may receive renewals if approved for up to a maximum of four (4) progressive years until graduation.
- Renewal scholarships only available to the students who received previous year scholarship.
- Scholarships provided based on availability of funds.

APPLICATION SUBMISSION INSTRUCTIONS

INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED. Please answer all questions, attach requested documents and make sure the application is signed by applicant and/or parent/guardian. If a question does not apply to you, please mark "N/A".

Each of your attachments should be **labeled** with the corresponding alphabetical letter indicated on the list below. Please label each document boldly on the top right-hand corner.

A Completed Application Includes: (Please check the boxes to indicate the attachments you have submitted. If an attachment is not applicable to you, please mark "N/A" next to the check box)

- Attachment "A"** Copy of your official high school transcript. If Renewal Application, an official full year transcript.
- Attachment "B"** Copy of your acceptance letter received from the college/university you plan to attend. If renewal, a copy of your confirmation of full time student status for the upcoming year.
- Attachment "C"** Copy of your financial award letter from the college/university you plan to attend (if applicable). Copy of your financial award letter for renewal as well.
- Attachment "D"** Copy of your final (multi-paged) Student Aid Report (SAR) from FAFSA at the U. S. Department of Education. The application process is outlined on the FAFSA website at www.FAFSA.ed.gov.

- Attachment “E”** Copy of your college/university’s estimated cost of attendance. If renewal, a copy of your college tuition bill.
(This information can be obtained from the college’s financial aid office, college brochure, or college website).
 - Attachment “F”** Essay: Statement of Goals for Furthering Education in the S.T.E.M. field, reasons for choosing the career goal; Current Activities and Achievements; and additional information you would like us to know about you including any “Unusual Circumstances” that should be considered.
 - Attachment “G”** Recommendation Form (provided with the application) must be completed by two teachers who have knowledge of your capabilities and then placed in sealed envelopes by those who completed them and mailed directly to the Foundation at the address below.
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Application does not guarantee receipt of scholarship award.

Please mail your application and all required attachments together in ONE envelope to:

(with the exception of the Recommendation Forms which are mailed directly to the Foundation by the persons who completed them)

**The Montgomery County Foundation, Inc.
4 Sentry Parkway East, Suite 302
Blue Bell, PA 19422**

THE CARSON SCHOLARSHIP FUND APPLICATION

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APPLICANT INFORMATION *Please print or type*

Name _____
Last First Middle

Permanent Address

Street

City County State Zip

Telephone (____) _____ Email: _____
Please print clearly

Date of birth _____ Gender: _____ Social Security: XXX - XX - ____ - ____ - ____

US Citizen (circle one) Yes No

FAMILY INFORMATION *Please circle relationship*

Father/stepfather/guardian _____

Address _____
Street City State Zip

Mother/stepmother/guardian _____

Address _____
Street City State Zip

Number of siblings financially dependent on parent(s)/guardian _____ Total number of family members _____

If you are an independent student:

Marital Status: Single Married Divorced

Number of dependents: _____

Annual Family Income: (Adjusted Gross Income)

Under \$25,000

\$25,000 - \$35,000

\$35,000- \$45,000

\$45,000 - \$55,000

\$55,000 - \$75,000

Over \$75,000

HIGH SCHOOL INFORMATION

Please attach: A copy of your official transcript (Attachment "A")

High School _____

Year of Graduation _____ SAT Scores: _____ Class Rank _____

POST SECONDARY EDUCATION INFORMATION

Please attach: A copy of your acceptance letter received from the college/university (Attachment "B") (if a renewal application, a copy of your matriculation letter.)

Institution for which aid is requested _____

_____ Street
 _____ City State Zip

Intended field of study: _____ Degree Sought _____

Expected graduation date: _____

FINANCIAL AID INFORMATION

Please attach: Financial award letter from your college/university (Attachment "C")
 Copy of your COMPLETE final (multi-paged) SAR or FAFSA Report returned from the U. S. Department of Education (Attachment "D")

Cost of Education per year:

Please attach: Copy of your college/university's estimated cost of attendance (Attachment "E") if renewal, Tuition Bill from college

<u>EXPENSES</u>	<u>Amount</u>	<u>Total</u>
Tuition and Fees	\$ _____	
Room and Board	\$ _____ (If applicable)	
Books and Supplies	\$ _____	
Transportation	\$ _____	
TOTAL EXPENSES		\$ _____ (A)

<u>INCOME</u>	<u>NAME OF GRANT OR SCHOLARSHIP</u>	
Federal, State & Other Awards (List loans and work study in Loan section below)	_____	\$ _____
	_____	\$ _____
	_____	\$ _____
	_____	\$ _____
	_____	\$ _____
College Grants & Scholarships (List loans and work study in Loan section below)	_____	\$ _____ <input type="checkbox"/> applied <input type="checkbox"/> received
	_____	\$ _____ <input type="checkbox"/> applied <input type="checkbox"/> received
	_____	\$ _____ <input type="checkbox"/> applied <input type="checkbox"/> received

_____ \$ _____ applied received
_____ \$ _____ applied received

TOTAL GRANTS & SCHOLARSHIPS \$ _____ (B)

Estimated Family Contribution from Student Aid Report (SAR) \$ _____ (C)

TOTAL INCOME (Item B plus Item C) \$ _____ (D)

FINANCIAL NEED (Item A minus Item D) \$ _____ (E)

LOANS AND EMPLOYMENT

NAME OF SOURCE

_____ \$ _____
_____ \$ _____
_____ \$ _____

TOTAL LOANS & EMPLOYMENT \$ _____

Financial information is confidential.

ESSAY (Attachment "F")

1. Please attach a statement describing your personal ambitions and educational and career goals. This statement should be a 1-2 page typewritten double-spaced essay and must include information that will answer each of the following questions:

SECTION ONE: Statement of Goals for Furthering Education in the S.T.E.M. Field.

- What are your short and long term career goals and what do you feel has inspired or contributed to the development of these goals?
- How do you plan to apply career goals to benefit society?
- Beyond your career goals what is your personal life's mission?

SECTION TWO: Current Activities and Achievements

SECTION THREE: Unusual Circumstances

Describe any additional information you would like us to know about you such as personal, financial, or family circumstances.

Sections ONE, TWO, and THREE should be answered separately. Please number each response.

ATTACHMENT "G" FOLLOWS AND MUST BE COMPLETED BY TWO HIGH SCHOOL TEACHERS (or college professors, if a renewal application) AND PLACED IN ENVELOPES SEALED BY THE TEACHERS AND MAILED DIRECTLY TO THE FOUNDATION (address below).

ATTACHMENT G

THE CARSON SCHOLARSHIP FUND

For senior students in the S.T.E.M. field with course work in physical sciences at Norristown Area High School.

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Scholarship Recommendation Form

This recommendation form must be completed by two high school teachers/college professors (if renewal) and placed in a sealed envelope by the person who completed the form. The sealed envelope should be MAILED directly to the Foundation at the address below please.

Completed applications are due by May 3, 2017 – no later than 3:00pm.

Applicant's Name: _____ **Date:** _____
Print

Applicant's Signature _____
Note: Signature grants permission to send information

Academic Evaluation *Check in the appropriate column your estimate of each trait listed.*

	Outstanding	Good	Average	Below Average	No Basis for Judgment
Academic Ability					
Academic Performance					
Academic Motivation					
Academic Growth Potential					

Personal Evaluation *Check in the appropriate column your estimate of each trait listed.*

	Outstanding	Good	Average	Below Average	No Basis For Judgment
Originality					
Energy					
Independence					
Leadership					
Maturity					
Initiative					
Reaction to set-backs					
Trustworthy					
Sensitivity to others					

In what context and for how long have you known the applicant?

Describe this applicant.

How do you think this applicant will perform in college?

Name: _____ **Title:** _____

Signature: _____ **Date:** _____

Phone No.: _____

CERTIFICATION AND SIGNATURES

I, (we) certify that the information on this form is true and complete to the best of my (our) knowledge. If asked by any authorized official of The Montgomery County Foundation, Inc. I (we) agree to give the documentation for information given on this form. I (we) realize that failure to comply with a request for additional information may prevent the applicant from receiving any aid. I also grant The Montgomery County Foundation, Inc. permission to use my photograph and/or selected quotes on their website and in future publications.

Applicant signature Date

Parent, Step-Parent, or Legal Guardian signature (Include proof of Guardianship) Date

Send completed application and all required attachments together in ONE envelope to:

(with the exception of the Recommendation Forms which are mailed directly to the Foundation by the persons who completed them)

The Montgomery County Foundation, Inc.
4 Sentry Parkway East, Suite 302
Blue Bell, PA 19422

APPLICATIONS MUST BE RECEIVED IN THE OFFICE BY **MAY 3, 2017 – NO LATER THAN 3:00pm**
FOR THE UPCOMING SEMESTER/YEAR.

LATE APPLICATIONS WILL NOT BE CONSIDERED.

Thank you notes for scholarship grants should be sent to: Virginia Frantz, President & CEO,
The Montgomery County Foundation, Inc. at the above address.

Application does not guarantee receipt of a scholarship.