



KIWANIS CLUB OF SALEM
SCHOLARSHIP APPLICATION 2021

The Kiwanis Club of Salem, Virginia, offers two \$1500 scholarships to graduating seniors at Salem High School or Glenvar High School who plan to attend a College, University, or technical program at a Community College.

Kiwanis Club Scholarships are given to provide financial assistance to students who have achieved academic excellence and demonstrated leadership activities. Scholarship awards must be used for educational expenses such as textbooks or tuition. The check will be sent directly to your school of choice.

ELIGIBILITY:

1. A student applying for this scholarship must have been accepted in a College or University in the fall after graduating from Salem or Glenvar High School.
2. The scholarship will be awarded based on academic achievement, need, and leadership potential.
3. Complete applications must be postmarked no later than May 8, 2021.
4. Complete applications must be sent to:

Scholarship Committee
Kiwaniis Club of Salem
P. O. Box 133
Salem, Virginia 24153

CHECK LIST:

The following documents must be included in your application to be considered for a scholarship:

- 1. Part 1: Scholarship Application, letter of acceptance, college student ID**
- 2. Part 2: Applicant's Activity History**
- 3. Part 3: Applicant's Reference Forms: two (2) needed**
- 4. Part 4: Consent to Release Information to a Third Party**
- 5. Copy of official transcript (sent under separate cover)**



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PART 1

Application Deadline: Complete applications must be postmarked no later than May 8, 2021.

The criteria for judging the merit of your application will include your achievements, and your financial need, as well as your ability to express yourself clearly, concisely and with proper grammar. Please complete this form by printing legibly in black or blue ink.

Name of Applicant: _____

Address: _____

City: _____ State: _____ Zip Code _____

Phone Number (____) _____ Date of Birth: _____

Email Address: _____

Current School: _____

College, University, or technical program at a Community College you will be attending
in the fall. _____

(Attach a copy of your letter of acceptance to the back of this page.
Include your college student ID)

Please list names and telephone numbers of individuals who have agreed to write a recommendation on
your behalf.

A) _____

I certify that, to the best of my knowledge, all the information I have provided is accurate and complete.

Signature _____ Date _____



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PART 2

APPLICANT'S ACTIVITY HISTORY

(May use back of form or attach sheet and examples if more space is needed.)

PROVIDE A BULLETED LIST OF ANY HONORS/AWARDS AND DATE RECEIVED:

PROVIDE A BULLETED LIST OF ANY WORKSHOPS/CLUBS/WORK EXPERIENCES
(SCHOOL AND COMMUNITY):

PROVIDE A BULLETED LIST OF ALL EXTRA-CURRICULAR ACTIVITIES/CLUBS
OF WHICH YOU HAVE BEEN AN ACTIVE MEMBER.
PLEASE MAKE NOTE IF YOU HELD AN OFFICE OR RECEIVED A GRADE.



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PART 3

Name of Applicant: _____

This student is applying for a \$1500 scholarship from Kiwanis of Salem. Please complete this reference form and return it to the applicant for inclusion with his/her application. Complete applications must be postmarked no later than May 8, 2021. Additional attachments accepted.

1. How long and in what capacity have you known this applicant?

2. What three adjectives best describe this applicant and why?

3. Give a brief synopsis of why you think this applicant will be successful in college.

Name of Reference: _____

Signature of Reference: _____ Date: _____

Address: _____

City: _____ State: _____ Zip Code _____



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PART 4

CONSENT TO RELEASE FORM 2021

I, _____, hereby request and give my consent to release of the information specified below to the Kiwanis Club of Salem Scholarship Committee:

Kiwanis Club of Salem
Scholarship Committee
P.O. Box 133
Salem, VA 24153

I understand that all application information will be shared with the Kiwanis of Salem Scholarship Committee for the purpose of selecting scholarship recipients.

Materials to be released to the Kiwanis Scholarship Committee:

1. Copy of official school transcript
2. Scholarship Application
3. Two references

Reason for release:

Application for Kiwanis of Salem Scholarship

Applicant's Signature

Date _____

Parent or Guardian's Signature

Date _____

Should I be awarded a scholarship, I give my consent to release this information to the media, and I give my permission for my name and photograph to be used in Kiwanis of Salem promotional materials.

Applicant's Signature

Date _____

Parent or Guardian's Signature

Date _____