

**Burlington Kiwanis Education Foundation  
Academic Scholarship**

**Application must be postmarked by March 30, 2020**  
Late applications will not be considered

Print in blue or black ink. If you would like an electronic copy to complete, e-mail [shorn8240@gmail.com](mailto:shorn8240@gmail.com) and one will be sent to you.

Please attach the following to your application:

- A current transcript
- A list of school, church, community extra-curricular activities
- A list of school, church, community honors and awards
- Two letters of recommendation from non-family members

After completing your application and attaching documentation, please send to:

Susanna Horn  
2624 Ridgewood Drive  
Mebane, NC 27302

**BURLINGTON KIWANIS CLUB  
SCHOLARSHIP  
Application**

Date \_\_\_\_\_

Full Name \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_

Telephone Number \_\_\_\_\_

Date and Place of Birth \_\_\_\_\_

Church Affiliation \_\_\_\_\_

e-mail Address \_\_\_\_\_

**EDUCATION**

Please list high schools, middle schools, and elementary schools attended

Dates (*most recent first*)

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Class Rank \_\_\_\_\_ Number of Students in Senior Class \_\_\_\_\_ Cumulative High School GPA \_\_\_\_\_

SAT Scores: Reading/Writing \_\_\_\_\_ Math \_\_\_\_\_

Or ACT Score Composite \_\_\_\_\_

Please state your ambitions and reasons for wishing to pursue a specific career:

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

College you plan to attend: \_\_\_\_\_

Have you been accepted? \_\_\_\_\_

**FAMILY INFORMATION**

Father's Name \_\_\_\_\_ Is your father living? \_\_\_\_\_

Address \_\_\_\_\_

Employer/Occupation \_\_\_\_\_

Mother's Name \_\_\_\_\_ Is your mother living? \_\_\_\_\_

Address (if different from above) \_\_\_\_\_

Employer/Occupation \_\_\_\_\_

Number of Brothers and ages \_\_\_\_\_ Number of Sisters and ages \_\_\_\_\_

**FINANCIAL SUPPORT**

Family's gross annual income: \_\_\_\_\_

Number of children who will be in college during the next four years: \_\_\_\_\_

Estimated amount to be contributed by your family toward your education \_\_\_\_\_

Are you currently employed? \_\_\_\_\_ If so, what are your anticipated gross earnings? \_\_\_\_\_

Will you be employed this summer? \_\_\_\_\_ If so, what are your anticipated gross earnings? \_\_\_\_\_

What jobs have you held (include this summer)? \_\_\_\_\_

Have you applied for any scholarships? \_\_\_\_\_

If yes, list the scholarship, amount of anticipated support, and whether or not the scholarship has been awarded:

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

Estimate the amount of tuition and fees, room and board, books and supplies, etc. that you will pay during the first academic year in college:

\_\_\_\_\_

*I hereby grant permission to allow the release of information contained in this application to members of the scholarship committee.*

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_