

**Kim Tucker/Joe Davidson Memorial Scholarship**  
**Sponsored by**  
**ELKHART-MORTON COUNTY FIRE DEPARTMENT**

This scholarship has been established in memory of Kim Tucker. The purpose of this scholarship is to encourage graduating seniors to further their education. The scholarship is to be used for the year applied.

Scholarship Committee: The scholarship committee will be selected by the Elkhart-Morton County Fire Department. The committee will select two recipients and an alternate.

Eligibility: Must be a graduating senior of U.S.D. 218. Grade point average through 7 semesters shall be no lower than 2.5 overall G.P.A.

Scholarship: The two scholarships of \$500.00 each will be pro-rated, \$250.00 per semester, to the college of the recipient's choice, i.e., College, Jr. College, Voc- Tech, Business School, Beauty School, etc.

The Certificate of Award by an Elkhart-Morton County Fire Department member. Also the recipient will receive a Certificate of Award to be presented to the Registrar's office of his or her respective school. A check will be forwarded to the school upon notification of enrollment of the recipient.

Applications: Available at the Counselor's Office at Elkhart High School.

Scholarship Deadline: May 1<sup>st</sup>

Turn in application to the Elkhart High School counselor's Office.

**Application on reverse side.**

# KIM TUCKER MEMORIAL SCHOLARSHIP APPLICATION

Year \_\_\_\_\_  
Address \_\_\_\_\_  
Phone Number \_\_\_\_\_

S.S. Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
Elkhart, Kansas 67950  
Date of Birth \_\_\_\_\_

1. 7<sup>th</sup> Semester Grade Point Average \_\_\_\_\_  
Attach a copy of your 7<sup>th</sup> semester transcript.
2. List part time summer jobs you have held:

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3. List civic and school activities:

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4. List volunteer and community activities:

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5. What school do you plan to attend and what do you intend to study?

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6. How do you plan to finance your college education?

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7. Enclose a letter of reference with your application from one of your teachers or an adult outside your family who knows you well.

8. Applicant's Statement:

A: The information submitted in this application is complete and correct.

B: I will use the proceeds of any scholarship aid received for the payment of tuition, required class fees, room, board, required materials or books. I will be a full time student at the chosen college or university.

Signed \_\_\_\_\_ Date \_\_\_\_\_

**Note: If there is not enough space provided for your answer, please star (\*) the question and put full and complete answer on a separate sheet of paper and attach to the application.**