February 24, 2020

Dear Carmi White County High School Graduating Senior;

The enclosed Carmi Kiwanis Club Scholarship application is being sent to all graduating seniors in the Carmi White County High School Class of 2020, who are currently members of Key Club.

Scholarship selection shall be considered based upon candidates (A) Motivation, (B) Personal Presence, (C) Scholastic Involvement, (D) Scholastic Leadership, and (E) Scholastic Service.

If you are interested in applying for this $1,000.00 scholarship, please read the criteria sheet, and complete and submit the following by the deadline date of Wednesday, April 15, 2020 at 3:00pm.

1. Complete the application form.

2. Have a rating sheet completed by two (2) of your teachers. The rating sheets may

be obtained by you from the High School Guidance Office, Mr. Clinton Wolff. You shall then pass these rating sheets on to two (2) of your teachers and request that the teachers return the completed rating sheets to the High School Guidance Office, Mr. Clinton Wolff by Wednesday, April 15 at 3:00pm.

Thank you for your efforts. Congratulations on your accomplishments and best wishes for your future.

Sincerely,

Scholarship Members

Thys Bax, Kim Gwaltney, Matt Lamont, Dr. Clint Taylor

Kiwanis Club of Carmi Scholarship Members

**APPLICATION**

**Carmi Kiwanis Club Scholarship**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parents \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

College Choice & Major\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Academics GPA \_\_\_\_\_\_\_ Rank in Class\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Goals What objectives in life do you have during and after college, and how will this Scholarship assist you in meeting these goals?

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Service to School Please list any scholastic activities and/or events that you have been involved in including extracurricular activities and/or events (ie. Academic, athletic, arts, band, choir, drama, Key Club, Student Counsel, etc.)

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Leadership Please list any scholastic offices held. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Should you need additional space to complete the application, please attach another page or pages.

Your Completed Application & 2 Rating Sheets from two separate teachers must be submitted to

**Mr. Clinton Wolff, Guidance Counselor Office by Wednesday, April 15 2020 at 3:00pm.**

**Carmi Kiwanis Club Scholarship Senior Student Rating Sheet**

Dear Teacher,

Thank you for your assistance.

Applicants for the Carmi Kiwanis Club Scholarship are required to have a rating sheet completed by two of their teachers. No letters of recommendation may be received from teachers.

Please be as accurate and as objective as possible and remember that the student does not see this sheet. Any extra comments you would like to share will be welcome. Rate them one through five with five being the best rating.

*Please do not give this sheet to the student. Return this sheet in the enclosed envelope to the High School Guidance Office, Mr. Clinton Wolff* by **Wednesday, April 15 2020 at 3:00pm.**

Thank you again for taking time to complete this rating sheet. We feel it will be very helpful in evaluating the student.

Sincerely,

Scholarship Members

Thys Bax, Kim Gwaltney, Matt Lamont, Dr. Clint Taylor

Kiwanis Club of Carmi Scholarship Members

Student’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Subject that you teach this student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Class attendance record \_\_\_\_

2. Takes academically challenging courses \_\_\_\_

3. Prepares for class \_\_\_\_

4. Works to his/her full potential \_\_\_\_

5. Communication Skills \_\_\_\_

6. Honesty \_\_\_\_

7. Personal presence & appearance \_\_\_\_

8. Personality \_\_\_\_

9. Respectful to Teachers & Staff \_\_\_\_

10. Works with and is respectful of other Students \_\_\_\_

Please print your name and sign this form.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***(Additional comments are welcome on the back of this page.)***