

FOND DU LAC AREA FOUNDATION SCHOLARSHIPS/KIEKHAEFER

I. SCHOLARSHIP PROGRAM

Fond du Lac Area Foundation Scholarships, available through the E. C. Kiekhaefer Memorial Fund under the administration of the Fond du Lac Area Foundation, are available to high school seniors for continuing education purposes. Mr. Kiekhaefer was an industrialist of international reputation who founded the Mercury Marine Company of Fond du Lac as well as Kiekhaefer Aeromarine.

The Fond du Lac Area Foundation Scholarship checks are sent to the recipient, made payable jointly to the student and the chosen institution, upon receipt of written proof of registration at the college or university.

II. SCHOLARSHIP GUIDELINES

Applications will be evaluated on the following student criteria:

- | | |
|---|-------|
| A. Academic excellence | (25%) |
| B. Personal Statement (400Words) | (20%) |
| C. School activities | (15%) |
| D. Work Experience | (15%) |
| E. Financial Need | (25%) |

III. APPLICANTS MUST:

- A. Be a legal resident of Fond du Lac County.
- B. Submit a copy of a current SAR (**Student Aid Report**) from filed *Free Application for Financial Student Aid* (FAFSA) to include EFC Number (**Expected Family Contribution**) to verify financial need, and top portion of page confirming name and permanent address to verify residency. *Personal financial data may be blacked out.*
- C. Show a 3.75 Cumulative Grade Point Average or higher on transcript
- D. Submit a **certified high school transcript** and **ACT Score Report** along with the application.
(Home schooled applicants may be considered)

IV. APPLICATION DEADLINE

Applications must be postmarked or received no later than March 31. Mail or deliver to:

Fond du Lac Area Foundation Scholarship Committee
384 N. Main Street, Suite 4
Fond du Lac, WI 54935

FOND DU LAC AREA FOUNDATION SCHOLARSHIP/KIEKHAEFER

APPLICATION FORM

(PLEASE TYPE OR PRINT CLEARLY)

I. PERSONAL DATA

Name: _____ Age: _____
 Last First Middle

Home Address: _____
 Street City

 State Zip County of Residence Telephone Number

Name of Parents, Guardian, or Nearest Relative: _____

Address: _____

Email Address: _____

Occupation and Place of Employment Father _____
 Mother _____

II. FINANCIAL INFORMATION

List other dependents in family with ages and *note if presently attending college*: _____

Submit a copy of a current SAR (Student Aid Report) from filed *Free Application for Financial Student Aid* (FAFSA) to include EFC Number (Expected Family Contribution) to verify financial need, and top portion of page confirming name and permanent address to verify residency. **Personal financial data may be blacked out.**

III. EDUCATIONAL DATA

A. What post-secondary institution do you plan to attend? (Please include address)

(First Choice) (Address)

(Second Choice) (Address)

Have you been accepted? First Choice _____ Second Choice _____

Do you plan to attend: full-time? [] yes [] no

part-time? [] yes [] no

B. Projected expenses for year in which assistance is requested:

Tuition _____

Fees _____

Books and Supplies _____

Other Expenses (Explain) _____

Total: _____

C. Record of High School Education

APPLICANTS MUST ATTACH AN **ORIGINAL** CERTIFIED HIGH SCHOOL TRANSCRIPT SHOWING CUMULATIVE GPA

Name and address of High School	From Month/Yr	To Month/Yr	Diploma Month/Yr
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

D. High School Scholastic Honors and/or Awards

(Attach additional pages if needed)

E. Will you receive other scholarships/grants? Please identify.

IV. COMMUNITY, HIGH SCHOOL, AND VOLUNTEER ACTIVITIES

List your community, high school and volunteer activities and years participated: (Student Government, Athletics, Clubs, Organizations, Offices Held, etc.)

Organization	Activity	Office or Award	9 th	10 th	11 th	12 th

*** If you attach a separate sheet for activities, it must follow the grid as it appears on the application. Do not mix school activities and community/work history on the form.**

V. WORK EXPERIENCE

List present and past employment experience beginning with your most recent job.

Name & Address of Employer Type of Business	From (Month/Yr)	To (Month/Yr)	Job Title & Duties
1. _____	_____	_____	_____
_____	_____	_____	_____
2. _____	_____	_____	_____
_____	_____	_____	_____
3. _____	_____	_____	_____
_____	_____	_____	_____

Do you plan to do outside work while attending school? Yes [] No []

Explain Briefly _____

VI. PERSONAL STATEMENT

Statement should be **no more than 400** words, typewritten on a separate page, and attached to application. (Applications exceeding 400 words will not be considered.)
The following items should be addressed:

1. Describe your career aspirations and goals
2. Describe your education plan.
3. What have you learned from work/volunteer experiences.

VII. REFERENCES

List two references (not family members) familiar with your scholastic performance and/or work and volunteer activities. Contact references to obtain their permission for use of their names, occupation, address and phone numbers. **Do not attach letters of reference.**

A. Name _____ Occupation _____

Address _____ Phone No. _____

B. Name _____ Occupation _____

Address _____ Phone No. _____

SEND SIGNED, COMPLETED APPLICATION FORM AND **ORIGINAL CERTIFIED** TRANSCRIPT TO:

Fond du Lac Area Foundation Scholarship Committee
384 N. Main Street, Suite 4
Fond du Lac, WI 54935

Applications must be postmarked or received no later than March 31.
Scholarship recipients will be notified by mail and recognized in the local newspapers. **Upon written proof of enrollment, a check will be sent to the recipient, payable to the recipient and the college of choice.**

I hereby certify that the information I have submitted is correct to the best of my knowledge.

Signature _____

Date Submitted _____