



## Kleiman Family Scholarship 2007-08 Application

(You may print or type responses on this form, or reproduce form on computer.)

- You may apply for as many scholarships as you wish, however, a separate application, including appropriate attachments, must be completed for each scholarship.
- Please staple all attachments together with each application. Do not include binders or report covers with your submission(s).
- If a question is not applicable to you, please write "N/A" (do not leave the question blank).
- Incomplete applications and applications not properly collated will not be considered.
- Submit application to your Guidance Counselor by March 1, 2007.

Name (First Middle Last): \_\_\_\_\_

Date of Birth (M/D/YY): \_\_\_\_\_ Gender: M  F

Home Address:(Street & Number) \_\_\_\_\_  
(City, State, Zip) \_\_\_\_\_

Student's Email \_\_\_\_\_ Home Telephone: \_\_\_\_\_

Parents' Names: \_\_\_\_\_

Father's Occupation: \_\_\_\_\_ Father's Employer: \_\_\_\_\_

Mother's Occupation: \_\_\_\_\_ Mother's Employer: \_\_\_\_\_

Number of Siblings: \_\_\_\_\_ Number of Siblings Currently Attending College: \_\_\_\_\_

High School Attended: \_\_\_\_\_ Counselor's Name: \_\_\_\_\_

Grade Point Average: \_\_\_\_\_ Rank in Class: \_\_\_\_\_ out of a class of: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

SAT Scores: Verbal \_\_\_\_\_ Math \_\_\_\_\_ Writing \_\_\_\_\_ Date Taken: \_\_\_\_\_

ACT Composite: \_\_\_\_\_ Date Taken: \_\_\_\_\_

**How did you hear about scholarships offered by the Greater Cedar Rapids Community Foundation?**

- |   |                                      |
|---|--------------------------------------|
| <input type="checkbox"/> Counselor/Financial Aid Office | <input type="checkbox"/> Friend      |
| <input type="checkbox"/> Education Planning Center      | <input type="checkbox"/> Web site    |
| <input type="checkbox"/> Previous applicant/recipient   | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Newspaper Ad                   |                                      |



Have you received a financial aid notification letter from the institution where you will be attending? \_\_\_\_  
If so, indicate the type and amount of assistance you will receive/be accepting in the space below or attach a copy of the notification letter (attach an additional piece of paper if necessary).

Type of Assistance

Amount

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Indicate below all scholarships and loans that you have applied for from other sources for the upcoming academic period (attach an additional piece of paper if necessary).

Date Applied                      Type of Scholarship                      Amount                      Status (Approved/Pending/Declined)

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Do you expect to work during the academic year (including work study)?    Y        N

If so, how many hours per week \_\_\_\_\_                      Name of employer \_\_\_\_\_

**Unusual Financial Circumstances**

If a student and/or his/her family have unusual financial circumstances, please explain them below (ex: tuition at an elementary/secondary school; family member who recently became unemployed; unusual medical expenses not covered by insurance; any other circumstances that affect income). Attach an additional piece of paper if necessary.

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**Please read before submitting your scholarship application:** By submitting this application, I certify I have filed or will file the Free Application for Federal Student Aid (FAFSA) before the March 1, 2007 deadline date. If I do not file the FAFSA for 2006-07 and submit the Statement of Estimated Family Contribution (EFC) with my application, I understand that I will be ineligible for scholarships based upon financial need. By submitting this application, I certify that the information contained therein is correct to the best of my ability and understand that false information or omission of data may result in denial of my application. I will provide all materials to my high school counselor by March 1, 2007. **If chosen for a GCRCF scholarship award, I agree to complete the Scholarship Recipient's Agreement Form and thank you letter(s), and return them to the scholarship office. I understand that if I do not comply with this requirement, my scholarship funds will be awarded to the selected alternate.**

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_ I understand that I must complete the Free Application for Federal Student Aid (FAFSA) and attach the Statement of Estimated Family Contribution (EFC) to my application to be considered for scholarships based on financial need.

\_\_\_\_ I have included an academic letter of reference.

\_\_\_\_ I have included a non academic letter of reference.

\_\_\_\_ I have included my latest academic transcript.

\_\_\_\_ I have included the original plus 5 copies for each scholarship that I am applying for.

**Please return this application and required materials to your High School Counselor by March 1, 2007**