



# SCHOLARSHIP APPLICATION

P.O. Box 202, Denver, IA 50622

**Application Deadline: April 10, 2020.**

Application and Reference Forms should be delivered to High School Guidance Office.

## IMPORTANT INFORMATION:

1. Eligibility: Denver high school seniors who are graduating in 2020
2. Please type or neatly print your application
3. Fill in all blanks on the application. If it does not apply to you, use N/A (not applicable).
4. References must be made using the reference forms. The reference should come from teachers, coaches, sponsors, tutors, counselors, anyone who works with you in a community, church or employment capacity.
5. Evaluation will be conducted by a panel of individuals selected from the Denver Cyclone Scholarship Foundation.
6. Administrative/Award Procedures:
  - a. Recipients must begin studies during 2020 - 2021 academic year.
  - b. Recipients must be enrolled as a full-time student at any accredited vocational, trade, 2-year or 4-year college.
  - c. Scholarship funds will be forwarded when written verification is received of grades (minimum 2.0 GPA, minimum of 12 semester hours, and request for payment must be made within 12 months for 1-year scholarship and 2 years for 2-year scholarship).

## PRINT OR TYPE

	First Name	Middle Name	Last Name	
Student Applicant	<hr/>			
Student Applicant's Home Address	Street	City	State	Zip
Student Applicant's Permanent Email address	<hr/>			

## Education Plans

College, University, Technical or Trade School you plan to attend \_\_\_\_\_

Date you expect to enter: \_\_\_\_\_

In what course of study do you plan to major? (be specific-additional scholarships maybe available based on course of study) \_\_\_\_\_

## HIGH SCHOOL EMPLOYMENT HISTORY

[Maximum Points 20]

Employer and Position	Date Employed (From – To)	Hours Per Week
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## HIGH SCHOOL VOLUNTEER SERVICE

[Maximum Points 10]

List all volunteer service activities in which you have participated without pay during the past 4 years (e.g. Red Cross, church work, school, community, library, etc.) (Attach additional pages if needed).

Activity	Years	Hours Volunteered
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## DENVER CYCLONE SCHOLARSHIP FOUNDATION VOLUNTEER SERVICE

[Maximum Points 5]

List all volunteer service activities in which you have participated without pay during the past 4 years (e.g. Phone-a-Thon, Alumni Reception, Grand March, Break Away Days Parade, etc.).

Activity	Years	Hours Volunteered
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TO BE READ AND SIGNED BY SCHOLARSHIP APPLICANT:

I hereby declare that all information contained in this application is true to the best of my knowledge. The essay is my own work.

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Signature of Applicant

Date

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**OFFICIAL USE ONLY**

TRANSCRIPT INFORMATION:

[Maximum Points 30]

Applicant ranks \_\_\_\_\_ in class of \_\_\_\_\_. Cumulative grade point average \_\_\_\_\_.

Number of Denver Cyclone Scholarship Foundation Volunteer Hours \_\_\_\_\_.

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School Official's Signature

Title

Date

# ***REFERENCE FOR THE SCHOLARSHIP APPLICANT***

[Maximum Points 15]

Two references required. (One Educator and One Non Educator - please no family members.)

Please print the information below:

Name of Applicant \_\_\_\_\_

Your Name \_\_\_\_\_

Your Relationship to the Applicant \_\_\_\_\_

Please rank the Applicant in each of the categories below by circling the appropriate number for each item.

The Applicant must submit this and all other application material on or before April 10, 2020.

## **RATING SCALE**

Rate the Applicant compared to the typical student.

4 – Outstanding      3 – Above Average      2 – Average      1 – Below Average

- |                           |   |   |   |   |
|---------------------------|---|---|---|---|
| • Leadership in school    | 4 | 3 | 2 | 1 |
| • Leadership in community | 4 | 3 | 2 | 1 |
| • Character and integrity | 4 | 3 | 2 | 1 |
| • Self-reliance           | 4 | 3 | 2 | 1 |
| • Initiative              | 4 | 3 | 2 | 1 |
| • Creativity              | 4 | 3 | 2 | 1 |

I hereby declare that the above information is accurate to the best of my knowledge and/or opinion.

Signature of Person Completing This Form \_\_\_\_\_ Date \_\_\_\_\_

THANK YOU FOR YOUR COOPERATION



# **REFERENCE FOR THE SCHOLARSHIP APPLICANT**

[Maximum Points 15]

Two references required. (One Educator and One Non Educator - please no family members.)

Please print the information below:

Name of Applicant \_\_\_\_\_

Your Name \_\_\_\_\_

Your Relationship to the Applicant \_\_\_\_\_

Please rank the Applicant in each of the categories below by circling the appropriate number for each item.

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Signature of Person Completing This Form \_\_\_\_\_ Date \_\_\_\_\_

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