**Kansas Kiwanis Foundation, Inc.**

**OFFICIAL USE ONLY**

Application #

 Division

Postmark

Date Rec’d

**2024-2025**

**COLLEGE Student Scholarship Application**

(KKF Form 101)

**THIS FORM TO BE USED BY COLLEGE STUDENTS ONLY!**

**HIGH SCHOOL SENIORS MUST USE KKF HIGH SCHOOL SCHOLARSHIP APPLICATION FORM 100**

Kansas Kiwanis Foundation is proud to offer scholarships to deserving students who are currently enrolled in institutions of higher education. ***This scholarship award will be for the academic year 2025-2026 payable to the institution in late August.***

1. Fill out this application **completely** in the space provided. **Failure to do so shall result in your application being disqualified!** You may go to [www.kskiwanisfoundation.org](http://www.kskiwanisfoundation.org) and go to Forms.

1. Previous editions of this form are obsolete. **Use of any other application format shall result in your application being disqualified**.
2. You do not have to be a member of a Circle K Club to apply.
3. Mail application and required letter of recommendation to:

 **Scholarship Committee, Kansas Kiwanis Foundation, 4011 SW 29th St, #137, Topeka KS 66614**

1. Application **MUST** be emailed or postmarked no later than **February 1, 2025** for your application to be considered.
2. Do NOT include additional pages with the exception of the reference letter and transcripts.
3. Use **black ink** to complete this application. If filling out on computer, Do Not print front to back.

# SECTION I. Personal Information:

1. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Address:

City: State: Zip: Email

**SECTION II. Circle K Club:** (complete only if a Circle K member)

1. Member of the Circle K Club. Number of years
2. Office(s) Held/Year: (1) /

(2) /

(3) /

(4) /

1. I certify that the above named applicant is a member in good standing of Circle K Club of
2. Signed:

Circle K Club Faculty Advisor, District Circle K Administrator or Local Kiwanis Club Secretary (Circle one)

# SECTION III. Parent or Legal Guardian Information:

1. Name Relationship to applicant: Father\_ Mother Guardian
2. Address:

City: State: Zip: Telephone:

1. Occupation: Father Mother Guardian

# SECTION IV. Kiwanis Club Membership:

a. Do you have a family member in Kiwanis? If so, member name and club?

b. Office(s) Held/Year (1) / (2) / (3) / (4) /

# SECTION V. Scholarship to Be Used At the Following Institution:

## Name of Institution:

1. Address:

# SECTION VI. Activities while in College - Confine lists to the space provided.

## College Activities: Use the following format when listing activities:

Activity (Explanation of activity if not well known or obvious), Duration (Years, Weeks, Days of activities)

|  |  |
| --- | --- |
| *Example:*Student Government, Married Housing Senator | One year, one three hour meeting a week |
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## College Awards and Honors: Use the following format when listing activities:

Award / Honor (explanation of award if not well known or obvious, year(s) received, source of award

|  |  |  |
| --- | --- | --- |
| *Example:*Award of Excellence in Political Science | Freshman year | Political Science Department |
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**SECTION VII. Community Service while in college.** Use this format when listing Community Service: Specific service or specific project, duration (years, months, weeks), total number of service hours involved, origination of the projects (Club, Church, class or individual) Do not group projects. **Confine list to the space provided.**

Service which **does not qualify** includes*: Paid or stipend service, any form of fundraising, lobbying, efforts directed to serve only a family member or serving as an officer of an organization.*

|  |  |  |  |
| --- | --- | --- | --- |
| *Example:*Red Cross Blood Drive, donated blood and worked | 1 day | 2 hours | Fraternity |
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**SECTION VIII. Expectations:** Answer questions in the space provided; be specific and limit to 100 words maximum.

1. Discuss your personal strengths and any life lessons that you have learned.
2. Discuss your career goals and why you have chosen that path.

**SECTION IX. Financial:**

What is the yearly cost of attending your school? $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, including tuition and living expenses

How are you financing your education?

List summer and academic-year jobs you have held since graduating high school.

List ALL members of your family, including those living at home or currently enrolled in college by name and ages:

Father Mother

Yourself

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_

# SECTION X. Transcript - Attach a copy of your college transcript.

**SECTION XI. Applicant’s Statement**

In submitting this application, I certify that:

* 1. I will be a full-time student at the educational institution I attend;
	2. I will use the proceeds of this scholarship for the payment of tuition, required fees, room, board and or required material/books;
	3. I agree to release my grades to the Kansas Kiwanis Foundation and I will attach a copy of transcript(s) of my college grades with this application;

### I will attach one (1) Letter of Recommendation (page 5) from a community or religious leader, neighbor, or employer, Do NOT use a person affiliated with your school; and,

* 1. That the information submitted with this application is, to the best of my knowledge, true and correct.

## **SIGNED: Date: / / 20**

#### SECTION XII. Educational History Student: Fill out the information before taking it to your College Advisor, an instructor or another college official. Take an envelope with your name on the outside in which the individual may place this completed page and seal once it is completed. We do NOT need a copy of your high school transcript.

**Student Name**

**High School from which you graduated*:***

*Years attended: From: to: School Address*

*If you have attended colleges or universities other than the one listed on Section V, list the previous ones here:*

1. *College or University attended from to Address \_ GPA*
2. *College or University attended from to Address \_ GPA*

#### SECTION XIII. College Official: please complete the following evaluation of this student. Do Not attach a letter of

***recommendation. Place this page into the accompanying envelope and return it to the student.***

***A school official must complete the following for this application to be considered. This student is applying for a scholarship, and we use the information in selecting recipients. Due to Federal Legislation the student may request and be given permission to see your recommendation. Please use black ink.***

*Please evaluate the applicant’s personal qualities*

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| ***PERSONAL QUALITIES*** | ***Truly Outstanding*** | ***Excellent*** | ***Good*** | ***Average*** | ***Below Average*** | ***No Basis for Judgment*** | ***Comments*** |
| *Motivation* |  |  |  |  |  |  |  |
| *Leadership* |  |  |  |  |  |  |  |
| *Dependability /**Responsibility* |  |  |  |  |  |  |  |
| *Cooperation* |  |  |  |  |  |  |  |
| *Intellectual**Curiosity* |  |  |  |  |  |  |  |
| *Ability to work**independently* |  |  |  |  |  |  |  |
| *Initiative* |  |  |  |  |  |  |  |
| *Self-Discipline* |  |  |  |  |  |  |  |
| *Integrity / Honesty* |  |  |  |  |  |  |  |
| *Resilience* |  |  |  |  |  |  |  |
| *Maturity* |  |  |  |  |  |  |  |
| *Emotional Stability* |  |  |  |  |  |  |  |
| *Social Adjustment* |  |  |  |  |  |  |  |
| *Concern for Others* |  |  |  |  |  |  |  |

#### Please mark the basis for your ratings. You may mark as many as apply.

 *Records and Reports Personal acquaintance Casual Contacts Counseling contacts*

 *Committee Evaluation Other*

*Any comment you would like to make on behalf of this student:*

*Signature and Title \_ Date*

**Letter of Recommendation**

***Give this sheet to a community or religious leader, neighbor, or employer.***

***Do NOT use a person affiliated with any of your schools.***

*Name of your reference letter author\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*How have you been involved with them\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

**Attention Letter Writer:** We will have a copy of the student’s transcript. The student will list activities, awards, honors, and service performed. What we would like from you are comments on the student as a person, the person as a student, how you know the applicant, how long you have had a relationship, and how much you have observed the applicant delivering service to target populations. Please include in what role you are familiar with the student. You may use this page for your letter or use a letterhead instead.