



## **BENDER FOUNDATION FUND**

### Instructions for Scholarship Application

1. The attached application is to be used for the Bender Foundation Fund Scholarship offered through the Tuscola County Community Foundation. One (1) \$500 scholarship, non-renewable. **This scholarship is available to a graduating Reese High School senior with a GPA of 2.0 or better who has demonstrated ‘a turnaround’ good attitude during their high school career and is pursuing post-secondary education. (i.e., vocational/trade schools, certificate programs, community colleges etc.)**
2. The scholarship award shall be distributed to the post-secondary institute selected by the scholarship recipient.
3. Application and required attachments must be **postmarked by March 15, 2024, to:**

**Tuscola County Community Foundation  
Bender Family Foundation Fund Scholarship  
P.O. Box 534  
Caro, MI 48723**

4. Applications are to be typed or legibly printed in ink and must be signed by the applicant. Applications not signed will not be considered.
5. Submit the **original application and one official high school transcript along with seven (7) copies of each (including letter of recommendations and any attachments)**. Please have original printed single sided and no staples.
6. Attach the application **and each of the seven (7) copies of the application** an essay (not to exceed two (2) typewritten pages, double-spaced, 12-point font) addressing the following:
  - Describe an experience in high school when you faced a personal challenge, and how you overcame it.
  - Describe an academic challenge that you faced and how you overcame it.
  - Where do you see yourself in five (5) years?



**BENDER FOUNDATION FUND  
SCHOLARSHIP APPLICATION**

**APPLICANT INFORMATION**

Name: \_\_\_\_\_  
Last First Middle

Permanent Address: \_\_\_\_\_  
Street City State Zip

Date of Birth: \_\_\_\_\_ Email: \_\_\_\_\_

Telephone: \_\_\_\_\_ Grade point average using a 4-pt. scale: \_\_\_\_\_

High School: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

**FAMILY INFORMATION**

Name of parent/guardian: \_\_\_\_\_ Occupation \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Name of parent/guardian: \_\_\_\_\_ Occupation \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Post-secondary school you are planning to attend: \_\_\_\_\_

Have you been accepted at this school? \_\_\_\_\_ Yes \_\_\_\_\_ No

Full-time student? \_\_\_\_\_ Yes \_\_\_\_\_ No If no, number of credits: \_\_\_\_\_

Major field of study: \_\_\_\_\_

Please list scholarships applied for:  
\_\_\_\_\_  
\_\_\_\_\_

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Please list scholarships granted and amounts:

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### **SCHOOL & COMMUNITY ACTIVITIES**

Using only the space below, list extracurricular, community and religious activities in which you have participated during the past 4 years. **Please list them in order of importance to you.**

<b>Activity</b>	<b>Num. of Years</b>	<b>Leadership Positions, Awards and Recognitions</b>

### **WORK EXPERIENCE**

Using only the space below, please list your paid work experience during the past four years, beginning with your most recent positions.

<b>Employer</b>	<b>Nature of Work</b>	<b>Dates of Employment</b>	<b>Hrs./Week</b>

### **CERTIFICATION**

I hereby affirm that the information provided on this form is accurate and complete to the best of my knowledge. I consent to having my name and image likeness included in public/media releases. If under 18, parent/guardian must also sign.

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Applicant's Signature

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Date

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Parent/Guardian Signature (if applicable)

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Date