



Scears Foundation of Akron, Michigan Scholarship Application

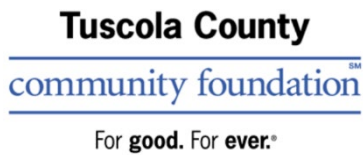
Instructions for Scholarship Application

1. The attached application is to be used for the **Scears Foundation of Akron, Michigan Scholarship** offered through the Tuscola County Community Foundation. **One (1) \$400 scholarships is available to be awarded to a senior student from Akron-Fairgrove High School who plans to enter a career within the field of education.** The scholarship awards are distributed to the post-secondary institute selected by the scholarship recipient.
2. Applications and required attachments must be **postmarked by March 15, 2024:**

**Tuscola County Community Foundation
Scears Foundation of Akron, Michigan Scholarship
P.O. Box 534
Caro, MI 48723**

Applicants must have maintained a high school GPA of 3.00 or higher on a 4-point scale. This scholarship is non-renewable.

3. Applications are to be typed or legibly printed in ink and must be signed by applicant. Applications not signed will not be considered.
4. Submit the **original application and one official high school transcript along with seven (7) copies of each (including letter of recommendation and any attachments)**. Please have original printed single sided and no staples.
5. Letters of recommendation may be submitted. **If submitted, the original and seven (7) copies of each letter is/are to be included with the application material.**
6. Attach to 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:
 - a. Why do you merit this award?
 - b. What person or situation had the greatest impact on your life? Explain.
 - c. What do you expect to be doing in five to eight years? Keep your education and career goals in mind.



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APPLICANT INFORMATION

Name: _____
Last First Middle

Permanent Address: _____
Street City State Zip

Date of Birth: _____

Telephone: _____ Email: _____

GPA (using a 4 point scale): _____ ACT / SAT score: _____

High School: _____ Graduation Date: _____

Post-secondary institution you are planning to attend: _____

FAMILY INFORMATION: (Provide the following information where applicable.)

Name of parent/guardian: _____

Address: _____
Street City State Zip

Parents Occupation: _____

Name of parent/guardian: _____

Address: _____
Street City State Zip

Parents Occupation: _____

How is your post-secondary education being financed?

List scholarships applied for: _____

List scholarship amounts awarded to date: _____
