Tuscola County

community foundation

For good. For ever.

Robert & Barbara Tuckey Scholarship Application

Instructions for Scholarship Application

- 1. The attached application is to be used for the **Robert & Barbara Tuckey Scholarship** offered through the Tuscola County Community Foundation. **One (1) \$250 scholarship is** available to be awarded to a student graduating from Cass City High School pursuing a post-secondary degree at either Michigan State University or Central Michigan University.
- 2. Applications and required attachments must be postmarked by March 15, 2024, to:

Tuscola County Community Foundation Robert & Barbara Tuckey Scholarship P.O. Box 534 Caro, MI 48723

- 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 attached to each copy of the application (including letter of recommendation and any attachments). Please have original printed single sided and no staples.
- 5. Up to three (3) letters of recommendation may be submitted. If submitted, the original and seven (7) copies of each letter is/are to be attached to each copy of the application.
- 6. Attach to the application **and each copy of the application** an essay not to exceed two (2) typewritten, double-spaced pages (12-point font or greater) addressing the following:
- a. What do you plan to study in college and how does it relate to agriculture?
- b. Why do you merit this award?
- c. What person or situation has had the greatest impact on your life? Explain.
- d. What volunteer/community service experiences have you performed and how has this benefited or influenced you?
- e. 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:	City					
Street	City		State Zi	р		
Date of Birth:	Email:					
Telephone:	Tuscola County Resident:Y		_Yes	No		
List your grade point average using a 4-pt. scale:		_ ACT / SAT Sco	re:			
High School:	Graduation Date:					
FAMILY INFORMATION						
Name of parent/guardian:	Occupation					
Address:	City		7.			
Street	City	State	Zip			
Name of parent/guardian:		Occupation				
Address:						
Street	City	State	Zip			
Post-secondary school you are planning to attend	l:					
Full-time student?YesNo	If no,	number of credits	:			
Major field of study:						
How is your post-secondary education being fina	inced?					
Please list scholarships applied for:						
Please list scholarships granted and amounts:						

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.**

Activity	Num. of Years	Leadership Positions, Awards and Recognitions

WORK EXPERIENCE

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

Employer	Nature of Work	Dates of Employment	Hrs./Week

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.

Applicant's Signature