



RAWSON FOUNDATION SCHOLARSHIP

Instructions for Scholarship Application

1. The attached application is to be used for the Rawson Foundation Scholarship offered through the Tuscola County Community Foundation. **Two (2) \$3,000 scholarships are available to graduating Cass City High School seniors pursuing post-secondary education at Central Michigan University and/or Saginaw Valley State University with preference given to CMU applicants.**
2. The scholarship award is distributed to the post-secondary school selected by the scholarship recipient and is paid in \$1,500 installments for fall and winter semesters. The scholarship is renewable for up to 3 (three) years.
3. Application and required attachments must be **postmarked by March 15, 2025, to:**

**Tuscola County Community Foundation
Rawson Foundation 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 five (5) copies of each (including letters of recommendation and any attachments).** Please have original printed single sided and no staples.
6. Two (2) letters of recommendation **MUST** be submitted with application (Copy of recommendation letter form attached).
7. Attach an essay about you, your life and your plans for the future. Include motivating factors, important experiences, accomplishments, persons, events, classes, or hobbies which have helped shape your personal philosophy and goals (not to exceed two (2) typewritten pages, double spaced, 12-point font).



For good. For ever.®

RAWSON FOUNDATION SCHOLARSHIP 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:

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

Date

Parent/Guardian Signature (if applicable)

Date