

KILMER/MILLER SCHOLARSHIP PROGRAM
APPLICATION FORM
Due by April 1st

Applicant's Name _____ Current date: _____
Address _____ Age: _____
_____ SS#: _____

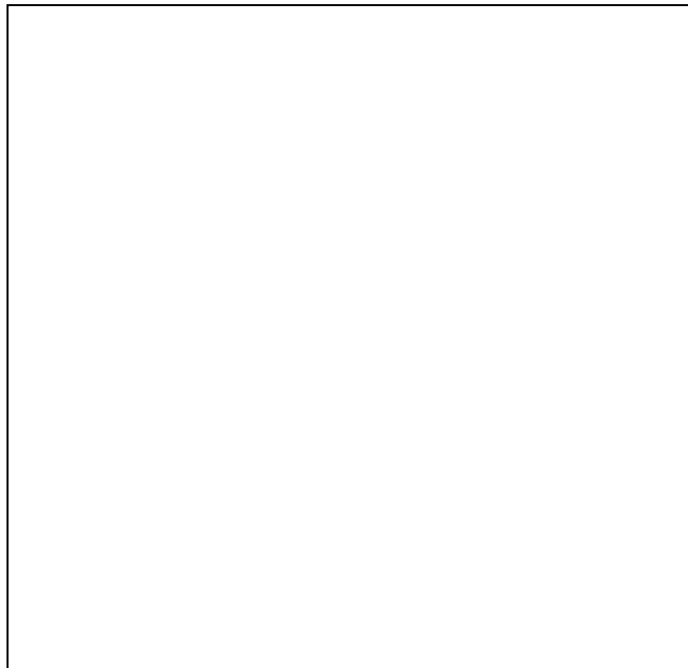
County _____ Email address: _____
Phone Number _____ Year of graduation: _____
School graduated from: _____

This application must be completed (in its entirety) and submitted by the applicant to:

Kilmer/Miller Scholarship
PO Box 188
Kensington, KS 66951

Note: Follow form carefully. If it is not prepared correctly, it could disqualify the application. Only applicants meeting eligibility criteria can be considered. Submissions cannot be returned to applicants.

PICTURE



ELIGIBILITY REQUIREMENTS

The Kilmer/Miller Scholarship is available to any Eastern Heights graduate, students graduating from Thunder Ridge High School from 2009-2012 who attended Eastern Heights, and Thunder Ridge graduates starting with the class of 2013. Applicants must attend any two or four year Kansas public or private college or any Kansas vocational technical school and have not already obtained a BS or BA.

Parts I, II, and III of this form must be completed by the applicant's principal or counselor. Parts IV and V are to be completed by the applicant. All pages must be returned to the scholarship committee. (Please type or print legibly in black or blue ink.)

I. College entrance examination score (ACT or SAT). Note: Please choose the type of examination taken. Test: _____ Score: _____

II. A. Student's cumulative high school grade point average (GPA) excluding spring semester senior year. _____

B. If the applicant is not a high school senior, please attach a copy of the college transcript.

III. Curriculum Check the following classes attended while in high school:

<input type="checkbox"/> Physics	<input type="checkbox"/> Chemistry	<input type="checkbox"/> Geometry
<input type="checkbox"/> Trigonometry	<input type="checkbox"/> Foreign Language I	<input type="checkbox"/> Foreign Language II
<input type="checkbox"/> Algebra II	<input type="checkbox"/> Advanced Computers	<input type="checkbox"/> Technology Class
<input type="checkbox"/> Advanced Math	<input type="checkbox"/> Advanced Welding	

Signature of Counselor/Principal (verifying person)

IV. Financial Need – In the space provided, please indicate your family’s adjusted gross income from the most current tax return. **Please attach a copy of the first two pages of your tax return OR have a bank officer at your local bank or paid preparer sign this form below. Parent’s signature will not be accepted.**

___	under \$25,000	___	\$40,000 to \$45,000
___	\$25,000 to \$30,000	___	\$45,000 to \$50,000
___	\$30,000 to \$35,000	___	over \$50,000
___	\$35,000 to \$40,000		

Number of dependents in your parent’s family including yourself: _____

Number (from above) attending college not including yourself: _____

Signature of verifying person

VI. College or School Planning to Attend

Type of school _____

Name of school attending / will attend _____

School address _____ School phone _____

Major and Minor of Emphasis _____

Anticipated graduation date from college/trade school _____

Will you be full-time for the Fall semester? _____

Will you be full-time for the Spring semester? _____

Do you plan on working during the semester? _____ If yes, for which? _____

**** Note:** If you are awarded a scholarship, but elect to attend a school different than the one listed above, you may not be awarded the scholarship.

Provide the school, along with this application, two to four letters of reference from individuals who are not family members. Please have them sent directly to the school. These letters should address their knowledge of your character, leadership responsibilities fulfilled, academic/athletic accomplishments and community involvement.

Also a paragraph of "Why additional education is important to me?" needs to be included with this application.

All of the information provided with this application is true and accurate to the best of my knowledge. I have reviewed the qualifications and certify that I would be eligible to receive this scholarship. I give permission to the school to use information provided in this application, excluding the financial information, in any subsequent communications related to this scholarship program. Use may include publishing information in publications, advertisements, newsletters, high school websites, or inclusion in publications such as newspapers, including my photograph, likeness and name.

Signature of Applicant

Date