

D.C. DUER SCHOLARSHIP FUND APPLICATION

The primary purpose of the D.C. Duer Foundation is to provide funding for the educational needs of the citizens of Smith County, Kansas. The Foundation may make direct grants and aid or other assistance to students of Smith County, Kansas, or for any other purpose which tends to satisfy the educational needs of the citizens of Smith County, Kansas. The D.C. Duer Scholarship is renewable each year upon appropriate application, eligibility and approval.

The Trustee of the D.C. Duer Foundation is Karen L. Griffiths, P.O. Box 10, Norton, Kansas, 67654.

Do not add any other attachment but transcripts. Fill out the form carefully and completely. Essays or resumes are not appropriate.

If you are in need of obtaining a scholarship or other payment in furtherance of your education, the following application should be made and mailed to: Karen L. Griffiths, P.O. Box 10, Norton, Kansas, 67654, by March 30th of the year of application.

Name: _____ Email address: _____

Home Address: _____ Cell phone #: _____

Parent or Guardian's Name: _____

Parent or Guardian's Home Address: _____

Date of Birth: _____

High School Attended: _____

Year of High School Graduation: _____ Number in Class: _____

Rank in High School Class: _____ Scholastic Average: _____ ACT Score: _____

Name of college or university, school or vo-tech, which you are attending or desire to attend:

Date you desire to enter school: _____

Number of college credit hours you have completed: _____ hours.

Number of college credit hours you are presently enrolled: _____ hours.

Please state your eventual goal and educational plan: _____

Please state your area of interest: _____

Please list any other scholarships you have applied for and any other scholarships which have been approved: _____

Describe your need for this scholarship: _____

Please list any extracurricular, volunteer, charity work, employment, or activities of which you are proud: _____

List the names of two people the committee may contact for references:

Name: _____

Phone: _____

Address: _____

Name: _____

Phone: _____

Address: _____

Please attach only a high school transcript and a college transcript if you have completed credit hours.

Signature of Applicant

Date