



Carl Childs Scholarship Application

Instructions for Scholarship Application

1. The attached application is to be used for the **Carl Childs Scholarship** offered through the Tuscola County Community Foundation. **One (1) \$250 scholarship is available to a senior student graduating from Akron-Fairgrove Community Schools who plans to advance their education beyond high school with preference given to those students attending a trade, vocational, or agricultural post-secondary or apprenticeship program. Students attending other post-secondary institutions (i.e., community college or university) will also be considered.** The scholarship award is paid to post-secondary institution upon submission of documentation verifying enrollment.

2. Applications and required attachments must be **postmarked by March 15, 2025:**

**Tuscola County Community Foundation
Carl Childs Scholarship
PO 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 four (4) 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 four (4) copies of each letter are to be included with the application material.**
6. Attach to the application **and each of the four (4) copies of the application** a 200-word short essay (not to exceed two (2) typewritten pages, double-spaced, 12-point font) addressing the following:
 - a. Describe your career goals.
 - b. Describe your school experiences.
 - c. Describe your community volunteer experiences.



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APPLICANT INFORMATION

Name: _____
Last First Middle

Permanent Address: _____
Street City State Zip

Telephone: _____ Email: _____

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

High School: _____ Graduation Date: _____

Date of Birth: _____ Field of Study: _____

Post-Secondary Education program you are planning to attend: _____

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

Name of parent/guardian: _____

Address: _____
Street City State Zip

Occupation: _____

Name of parent/guardian: _____

Address: _____
Street City State Zip

Occupation: _____

How is your post-secondary education being financed?

List scholarships applied for: _____

List scholarship amounts awarded to date: _____

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

ESSAY

Applicants must submit a short essay (200 words or less) describing their career goals and school/community volunteer experiences.

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