

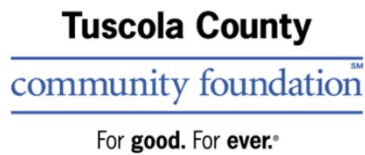


Scears Foundation of Akron, Michigan Scholarship Application

Instructions for Scholarship Application

1. The attached application is to be used for the **Scears Foundation of Akron, Michigan Scholarship** offered through the Tuscola County Community Foundation. **Two (2) \$500 scholarships are available to be awarded to one senior student from Akron-Fairgrove High School and one senior student from Caro Community Schools who plans to pursue a career in the field of Education. Applicants must have maintained a high school GPA of 3.00 or higher. This scholarship is non-renewable.**
2. Application and required attachments must be **postmarked on or before March 15, 2026:**

Tuscola County Community Foundation
Scears Foundation of Akron, Michigan Scholarship
P.O. Box 534
Caro, MI 48723
3. Applications are to be typed or legibly printed in ink and must be signed by the applicant. Unsigned applications will not be considered.
4. **Submit the original application, one official high school transcript, letter(s) or recommendation and essay. All submitted materials must be single-sided and unstapled.**
5. Letters of recommendation may be submitted.
6. Attach to the application an essay not to exceed two (2) typed pages, double-spaced 12-point font, single-sided and not stapled addressing the following:
 - Why do you merit this award?
 - What person or situation had the greatest impact on your life? Explain.
 - 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: _____
Street City State Zip

Date of Birth: _____

Telephone: _____ Email: _____

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

High School: _____ Graduation Date: _____

Post-secondary institution you are planning to attend: _____

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

Name of parent/guardian: _____

Address: _____
Street City State Zip

Parents Occupation: _____

Name of parent/guardian: _____

Address: _____
Street City State Zip

Parents 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

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

Parent/Guardian Signature (if applicable)

Date

Date