

KENNEDY FOUNDATION

PO Box 621609 • Littleton, Colorado 80162

Application for Scholarship

Date ____/____/____

Name _____

Last

First

Middle

Current Address _____

Street

City

State

Zip

Phone Number () _____ () _____ () _____

Home

Work

Cell

Emergency Contact () _____

Name

Phone

Email Address _____

Primary

Secondary

College Name _____

School Address _____

(Financial Aid Office)

Street

City

State

Zip

Estimated Tuition Costs:
(Per Year)

Description

Amount

\$ _____
\$ _____
\$ _____
\$ _____

Total: \$ _____

Current Financial Support:
(Including Parents)

\$ _____
\$ _____
\$ _____
\$ _____

Total: \$ _____

Major _____ Minor _____ Degree Desired _____

Years Completed _____ Years to Graduate _____ Current GPA _____ Credits Earned _____

Hours per semester you plan to take _____ Estimated Graduation Date _____ / _____

Goals and Objectives _____

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Education History

High School _____ Attended from _____ to _____ Graduated _____

College _____ Attended from _____ to _____ Graduated _____ Major _____

Other _____ Attended from _____ to _____ Graduated _____ Major _____

Employment History (Most recent employment first)

Employer _____ Position _____

Supervisor/Owner _____ Address _____

Phone (____) _____ Employed from _____ to _____ May we contact him/her? _____

Employer _____ Position _____

Supervisor/Owner _____ Address _____

Phone (____) _____ Employed from _____ to _____ May we contact him/her? _____

References (List three persons not related to you, whom you have known for at least one year)

Name _____ Address _____

Phone (____) _____ Relationship _____ Years Known _____

Name _____ Address _____

Phone (____) _____ Relationship _____ Years Known _____

Name _____ Address _____

Phone (____) _____ Relationship _____ Years Known _____

Other Required Information

Along with this completed form, you will need to provide the following:

1. A copy of your high school transcripts.

or

2. A Grade report for your last completed semester of college, including cumulative GPA and total credits.

Statement

I _____ certify that the foregoing statements and answers are true and complete to the best of
Printed Name
my knowledge.

Signature

_____/_____/_____
Date