

RULES and REGULATIONS GOVERNING THE STAYIN' ALIVE SCHOLARSHIP

- (1) The Stayin' Alive Scholarship is given annually to a Franklin County resident who will be a high school graduate this spring.
- (2) The scholarship is based on financial need and academic achievement, as well as the essay submitted with the application.
- (3) The scholarship, with number and amount to be determined annually by the members of Stayin' Alive, will be given at the beginning of the first semester of the student's freshman year in college. The award will be given with the understanding that is to be used for school purposes only.
- (4) Scholarship money may be used for any field of education provided it is in a course of study leading to a two or four year degree.
- (5) The scholarship committee of Stayin' Alive will choose the student who is to receive the award.
- (6) A certificate will be awarded to the recipient at Stayin' Alive's Open House on May 26, 2016 at 6:30 pm in the Franklin County Community Foundation Building located at 527 Main Street, Brookville, IN.
- (7) All completed applications are to be hand-delivered or mailed to the Stayin' Alive office at 527 Main Street, Brookville, Indiana 47012. All applications must be received by **Friday, April 15, 2016 at 12:00 p.m. noon.**
- (8) Please submit the **original** application and **five (5) copies** by the deadline.
- (9) Application for this scholarship is open to both male and female students.
- (10) If awarded the scholarship, proof of college enrollment or a copy of your tuition statement must be received by Stayin' Alive no later than July 15, 2016.

APPLICATION for STAYIN' ALIVE SCHOLARSHIP

DATE: _____

Name: _____
Last First Middle

Address: _____
Street City State and Zip Code

Telephone Number: _____
Home Cell

Father's Name: _____ Occupation: _____

Address (if different than student's): _____

Place of employment: _____

Mother's Name: _____ Occupation: _____

Address (if different than student's): _____

Place of employment: _____

Guardian Name if not living with parent: _____

Brother's & Sister's Information:

Number of siblings: _____ Age(s): _____

Number at Home: _____ Number in College: _____

Name of High School: _____

Number of students in your Graduating Class: _____

Your Rank in your Class: _____

List all Colleges/Universities you have been accepted to:

(1) _____

(2) _____

(3) _____

In what field do you intend to major? _____

List your extra-curricular activities in high school. (Example: S.A.D.D. – 10, 11 or Basketball – 9, 10, 11, 12)

(1) _____

(2) _____

(3) _____

(4) _____

(5) _____

(6) _____

(7) _____

List other Scholarships applied for or received: _____

Employment during Vacations or After-School:

Employer	Address	Dates Employed

Write a 500 word typed essay on How Drugs and/or Alcohol have affected your life to this point. It can be either a positive or a negative affect.

***Please do not include your name in the essay.**