

2019 SCHOLARSHIP APPLICATION

The Doss Wahls Foundation Scholarship was established in order to help deserving economically disadvantaged students pursue academic endeavors when their financial or economic resources hinder graduation.

Eligibility: Applicants must meet the following criteria:

- A. Be a student that is entering into last year of eligible post-secondary bachelor's or associate program or equivalent.
- B. Demonstrate financial need and also provide detail of parental, guardian, and/or family support and contribution to the success of the student's academic endeavors.

IMPORTANT! TO COMPLETE THIS APPLICATION YOU MUST

The applicant must provide:

1. *A copy of most recent Personal Federal Income Tax Return (excluding attachments or schedules) or other evidence of financial need.*
2. *A copy of the post-secondary institution's academic transcript (must be mailed by the institution), that indicates the student has achieved senior standing.*
3. *A copy of post-secondary institution's requirements for graduation.*
4. *A 1-2 page typed statement telling why you should be considered for this scholarship, your qualifications, and your educational and career goals.*
5. *Two completed individual Recommendation Forms to be returned as part of the application. Individuals should be current professor, school personnel, an employer or non-relative.*

If additional sheets are needed, please include the corresponding question(s) and number(s) on sheets, and please also include name of applicant on each attached sheet.

**COMPLETE APPLICATIONS MUST BE TYPED
AND
SUBMITTED VIA MAIL AND POST-MARKED
NO LATER THAN MAY 31, 2019.**

**Mailing Address:
Doss Wahls Foundation
P.O. Box 3549
Highland Park, MI, 48203**

Awards: Two non-renewable scholarships that may be either an \$1,750 scholarship for a student attending a 4-year institution that will be paid in two installments of \$875 or a \$750 scholarship for a student attending a community college will be awarded for one year. Within the discretion of the Foundation, incentive awards of \$500 may be awarded annually to additional qualified applicants.

Current and Past Post-Secondary Honors:

Community Activities and Honors:

FINANCIAL INFORMATION
The Doss Wahls Foundation Scholarship

Annual College Expenses

Estimated Annual Resources

Tuition/Fees:

Family contributions
Toward school expenses:

Room/Board:

Applicant's savings or earnings for school:

Books/Supplies:

Personal Expenses:

Financial Aid:

Grants:

Other:

Scholarships:

Loans:

Total:

Work/Study:

Other (specify):

Other income for
school expenses
(specify):

**Total estimated
Annual resources** _____

Name, address and telephone number of your financial aid officer at the post-secondary institution you currently attend or plan to attend if not enrolled (if known):

Doss Wahls Foundation

Applicant Employment Information: Please list your employment history, including dates, starting with most recent job.

Doss Wahls Foundation

Applicant Statement: The information provided in my application is, to the best of my knowledge, complete and accurate. I understand that false statements in my application will disqualify me from scholarship assistance. I give permission for any college or school to release to the Doss Wahls Foundation any information necessary to process my application for the Doss Wahls Foundation Scholarship. In addition, I give the Doss Wahls Foundation consent to use my name and image in promotional materials including, but not limited to the website.

Applicant's Signature _____ Date _____

RECOMMENDATION FORM
The Doss Wahls Foundation Scholarship

The student below is applying for the Doss Wahls Scholarship for undergraduate students demonstrating financial need. Your recommendation is needed as part of the application process.

Please complete this form and return it to **Doss Wahls Foundation, P.O. Box 3549, Highland Park, MI 48203**, postmarked no later than **May 31, 2019**.

To be completed by applicant:

Name of scholarship applicant _____

School applicant will attend next fall _____

Major/primary field of study _____

To be completed by reference:

How long have you known the applicant? _____

In what capacity have you known the applicant?

_____ Student _____ Employee _____ Other (specify) _____

Please rate the applicant in the following categories on a scale of 1 to 5 with 5 being the highest ranking and 1 being the lowest. You may also indicate "U" for unknown.

_____ Character _____ Volunteer Activity/Community Service

_____ Academic Performance _____ Work habits

_____ Leadership Abilities _____ Potential to achieve in chosen field

Scholarship Recommendation Statement: Please provide a statement of 150 words or less about why you think this candidate deserves this scholarship. Please see form on next page.

Scholarship Recommendation:

Print Name: _____

Signature: _____

Title: _____

Daytime Phone: _____

Date: _____