

**TOLEDO COMMUNITY FOUNDATION, INC.**

**GEAR UP Scholarship  
2010-2011 Information Sheet**



**Purpose:**

To provide annual scholarship(s) to graduates of or graduating senior(s) from Waite High School in Toledo, OH. Scholarship recipients may re-apply for three additional consecutive years of undergraduate study and will be considered for renewal if they maintain full-time status in school and demonstrate continued financial need. Applicants must be U.S. citizens.

**Qualifications for Eligibility:**

1. Graduate of the Class of 2010, or 2007-2009 graduate of Waite High School who is less than 22 years old at the time of the first scholarship award.
2. Is enrolled or accepted for enrollment in a program of undergraduate study at a college, trade school or other certified program. Must be an accredited post-secondary educational institution and an organization described in section 501(c)(3) of the Internal Revenue Service Code. For-profit educational institutions do not qualify as organizations described in section 501(c)(3) of the Internal Revenue Service Code.
3. Participated in the requirements of the Waite High School Benchmark component of the GEAR UP program, as confirmed by the Waite High School GEAR UP coordinator. Student must have attended Waite High School at least three out of four years and graduate(d) from Waite High School.

**Basis for Selection:**

1. Scholarship recipient(s) will be chosen by the Toledo Community Foundation's Scholarship Advisory Committee which will consider the qualifications listed above as well as the applicant's financial need, based on information submitted on the scholarship application form and all attachments (as noted below).
2. Awarding of financial aid will follow this order: (1) Pell grant; (2) other public or private grants, scholarships or tuition discounts; (3) the GEAR UP scholarship; (4) loans and work study.

**How to apply:**

1. Complete the scholarship application form. Attach copies of the following documents:
  - Letter of acceptance from the educational institution you will be attending
  - FAFSA/Student Aid Report (including expected family contribution – EFC)
  - Financial Aid letter from the educational institution you will be attending.
2. Mail completed application form and support materials to: Toledo Community Foundation, Inc.; ATTN: Joanne Olnhausen; 300 Madison Avenue, Suite 1300; Toledo, OH 43604 **by (postmarked) Monday, May 17, 2010.**

The Toledo Community Foundation Scholarship Advisory Committee will nominate award recipient(s). Awards will be announced in July 2010. If, in the opinion of the Scholarship Advisory Committee members, there are no qualified recipients in a given year, no nominations will be made.

Questions regarding the GEAR UP Scholarship should be directed to Joanne Olnhausen, Toledo Community Foundation, at 419-241-5049 or Joanne@toledocf.org.

**TOLEDO COMMUNITY FOUNDATION, INC.**

**GEAR UP Scholarship  
2010-2011 Application**



**INSTRUCTIONS:**

1. Type or print (in **black** ink); if you do not have an answer or an item does not apply to you, indicate N/A (“No Answer”).
2. Mail your completed application, a copy of your letter of acceptance from the educational institution you will be attending, your FAFSA/Student Aid Report, and a copy of the financial aid letter from the educational institution you will be attending to: Toledo Community Foundation, Attn. Joanne Olnhausen, 300 Madison Avenue, Suite 1300; Toledo, OH 43604 **by (postmarked) Monday, May 17, 2010.**



1. Name of Applicant \_\_\_\_\_  
(Last) (First) (M)

2. Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

3. Home Address \_\_\_\_\_  
(Street)  
\_\_\_\_\_  
(City) (State) (Zip Code)

4. Phone Number ( ) \_\_\_\_\_ E-mail: \_\_\_\_\_

5. High School Information:

\_\_\_\_\_  
(Name of School) (Address) (City/State)

Graduation Date \_\_\_\_\_ Class Rank \_\_\_\_\_ of \_\_\_\_\_

Cumulative Grade Point Average (as of the end of the first semester of your senior year): \_\_\_\_  
Highest composite score: ACT \_\_\_\_

6. Have you participated in the Waite Benchmark component of the GEAR UP program through Waite High School? \_\_\_\_ Yes \_\_\_\_ No

7. Have you attended Waite High School at least three out of the four years of high school (one of which must be senior year)? \_\_\_\_ Yes \_\_\_\_ No

8. Name of Father/Stepfather/Guardian: \_\_\_\_\_

Occupation \_\_\_\_\_ Annual Income \_\_\_\_\_  
(Position) (Company)

Name of Mother/Stepmother/Guardian: \_\_\_\_\_

Occupation \_\_\_\_\_ Annual Income \_\_\_\_\_  
(Position) (Company)

9. College, trade school, or other certified program you will be attending (**please attach a copy of the letter of acceptance from the educational institution you will be attending**):

\_\_\_\_\_  
 (Name of School) (Address) (City/State)

10. Intended Major/Discipline/Course of Study: \_\_\_\_\_

11. Please complete the income/expense information below based on information/decisions you have at the time of completion of this application as it relates to the educational institution of your choice:

<b><i>Income Sources for School:</i></b>		<b><i>Expenses:</i></b>	
<i>Scholarships (list each one separately):</i>		<i>Tuition</i>	\$ _____
<i>1.</i>	\$ _____	<i>Room and Board</i>	\$ _____
<i>2.</i>	\$ _____	<i>Fees, Supplies, Books</i>	\$ _____
<i>3.</i>	\$ _____	<i>Other Expenses</i>	\$ _____
<i>4.</i>	\$ _____		
<i>Grants (list each one separately):</i>		<b><i>Total Expenses</i></b>	<b>\$ _____</b>
<i>1.</i>	\$ _____		
<i>2.</i>	\$ _____		
<i>3.</i>	\$ _____		
<i>4.</i>	\$ _____		
<i>Work Study Programs</i>	\$ _____		
<i>Student Employment</i>	\$ _____		
<i>Parent Contribution</i>	\$ _____		
<i>Loans</i>	\$ _____		
<b><i>Total Income</i></b>	<b>\$ _____</b>		

12. Please describe any unusual financial circumstances or financial hardships that you wish the committee to consider:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

13. **Attachments:** In addition to your letter of acceptance (see #9 above), your application must include copies of:

- FAFSA/Student Aid Report (including expected family contribution – EFC)
- Financial Aid letter from the educational institution you will be attending.

I hereby certify that the information provided on this application is, to the best of my knowledge, true and correct. I agree, if requested, to provide the Foundation with additional information needed to determine my qualifications for this scholarship. If I become a scholarship recipient and if requested by the Foundation, I agree to furnish reports which can be used to determine my academic progress and use of scholarship funds. I authorize the Foundation to disclose information concerning my scholarship eligibility to the educational institution I will be attending. Further, I give my permission to the Toledo Community Foundation, Inc. to release any pertinent information for publicity purposes.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

If Applicant is under age 18

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_