

TOLEDO COMMUNITY FOUNDATION, INC.

**Jamie Farr Scholarship
2010–2011 Information Sheet**

Purpose:

To provide annual scholarship(s) to graduating high school senior(s) from the Northwest Ohio/Southeast Michigan area who will be entering an accredited school of higher education* in the fall of 2010. Scholarship recipients may re-apply for three additional years of undergraduate study and will be considered for possible renewal if they maintain a 2.5 cumulative GPA and full-time status. Applicants must be U.S. citizens.

How to apply:

1. Complete a scholarship application form (4 pages).
2. Obtain
 - a. Two signed letters of reference from high school teachers, guidance counselors and/or principal.
 - b. An official copy of your most recent high school transcript.
3. Submit to: Toledo Community Foundation; Attention: Joanne Olnhausen; 300 Madison Avenue, Suite 1300; Toledo, OH 43604 **by (POSTMARKED) FRIDAY, MARCH 5, 2010.** Please be sure sufficient postage is on the envelope.

Basis for Selection:

1. The criteria used for selection of scholarship recipients include consideration of the following:
 - a. Financial need **(annual household gross income and other support of \$55,000 or less);**
 - b. Scholastic aptitude **(ACT composite of at least 24 OR SAT composite of at least 1100, excluding writing section);**
 - c. Prior academic achievement;
 - d. Individual motivation, ability and potential;
 - e. Recommendations from those individuals in 2a. above;
 - f. Personal interview with Jamie Farr Scholarship Advisory Committee (if selected as finalist). **Interviews will be scheduled for the afternoon of Monday, April 26, 2010.**
2. The above-stated criteria may be revised from time to time as deemed appropriate by the Jamie Farr Scholarship Advisory Committee with the approval of the Board of Trustees of the Toledo Community Foundation, Inc.
3. Children of present and past members of the Jamie Farr Toledo Classic Board of Trustees and/or paid staff of the Jamie Farr Toledo Classic are not eligible to apply.

*Preference may be given to those applicants choosing to attend local (Northwest Ohio/Southeast Michigan) schools.

TOLEDO COMMUNITY FOUNDATION, INC.

**Jamie Farr Scholarship
2010-2011 APPLICATION**

Applications may be considered ineligible if not complete (i.e. with required attachments)
Please be sure to include:
* Completed application (4 pages)
* 2 signed letters of reference
* An official copy of your most recent transcript
* Activities sheet (#7 on application).

PLEASE TYPE OR PRINT WITH BLACK INK

1. Name of Applicant _____ Age _____
(Last) (First) (M)

2. Social Security Number _____ Phone Number () _____

3. Home Address _____
(Street)

(City) (State) (Zip) (County)

4. Father's Name/Guardian's Name _____
Address (if different than above) _____
(Street) (City) (State/Zip Code)
Occupation _____
(Position) (Company)

Mother's Name/Guardian's Name _____
Address (if different than above) _____
(Street) (City) (State/Zip Code)
Occupation _____
(Position) (Company)

5. Please list persons living in your home (**excluding those above**):

_____	_____	_____	_____
(Name)	(Age)	(Name)	(Age)
_____	_____	_____	_____
(Name)	(Age)	(Name)	(Age)

6. High School Information:

(Name of School) (Address) (City/State) (Phone)

Scheduled Graduation Date _____ Class Rank _____ of _____

Cumulative Grade Point Average _____ Last Semester Grade Point Average _____

Composite Scores: ACT (must be 24 or above) _____ OR SAT (must be 1100 or above, excluding writing section) _____

7. **Attach an additional sheet** listing school, community or athletic activities in which you have been involved; honors you have received; and offices which you have held during high school.

8. Please list the colleges, universities or other schools to which you have applied:

9. Please list the colleges, universities or other schools to which you have been accepted:

10. What will be your major in college (if known)? _____

11. Why are you interested in pursuing this course of instruction? _____

12. **HOUSEHOLD FINANCIAL INFORMATION:** To be eligible to apply for this scholarship your family/household gross income (that is, income before taxes and other deductions) and other sources of support must be **\$55,000 or less**. List below the amount of all family/household income, including (if applicable): parent/step-parent/guardian income, child support, alimony, etc.

NOTE: IF YOU REACH THE INTERVIEW STAGE FOR THIS SCHOLARSHIP, YOU WILL BE REQUIRED TO BRING YOUR PARENTS' OR GUARDIANS' LAST TWO INCOME TAX RETURNS TO THE INTERVIEW.

(Father/step-father/guardian annual gross wages)

(Mother/step-mother/guardian annual gross wages)

(Annual child support)

(Other income, alimony, etc.)

Please outline your employment history for the past four years. Include permanent employment, temporary help, and summer jobs. (Attach an additional sheet if necessary.)

What are your approximate annual earnings? \$ _____

Do you plan to work while attending college? YES _____ NO _____
If yes, explain _____

What would be your annual earnings? \$ _____

Do your parents own their own home or rent? OWN _____ RENT _____

What are your parents' approximate monthly housing costs (mortgage payment or rent) \$ _____

Do you have family members for whom college expenses are being paid for by your parents/guardians?
YES _____ NO _____ IF YES, PLEASE LIST

(Name of Student) (College/University) (Amount Paid by Family)

(Name of Student) (College/University) (Amount Paid by Family)

What amount (annually) will your parents/guardians be able to contribute toward your education? \$ _____

Do you plan to reside on campus? YES _____ NO _____

At this time, have you received any other scholarships, loans or awards? YES _____ NO _____
IF YES, PLEASE LIST (Attach an additional sheet if necessary)

(Source) (Annual Amount)

(Source) (Annual Amount)

Have you applied for any other scholarships, loans or awards? YES _____ NO _____
IF YES, PLEASE LIST (Attach an additional sheet if necessary)

(Source) (Annual Amount)

(Source) (Annual Amount)

Do you have any other source of funds available to you (i.e., savings account, insurance policies)?

YES _____ NO _____ IF YES, what amount is available? _____

13. If selected as a recipient of a **Jamie Farr Scholarship**, what would it mean to you? (If appropriate, include any special circumstances or financial hardships you would like to be considered.) Attach an additional sheet, if necessary.

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 THAT CAN BE USED TO DETERMINE MY ACADEMIC PROGRESS AND USE OF SCHOLARSHIP FUNDS. FURTHER I GIVE MY PERMISSION TO THE TOLEDO COMMUNITY FOUNDATION, INC. TO RELEASE ANY PERTINENT INFORMATION FOR PUBLICITY PURPOSES.

Applicant's Signature _____ Date _____

If Applicant is under age 18

Parent/Guardian Signature _____ Date _____

Please attach two letters of reference (as indicated on the scholarship information sheet), an official copy of your high school transcript, and an activities sheet (#7 on this application). Information should be mailed to:

**TOLEDO COMMUNITY FOUNDATION, INC.
Attention: Joanne Olnhausen
300 Madison Avenue, Suite 1300
Toledo, OH 43604**

MATERIALS MUST BE POSTMARKED BY FRIDAY, MARCH 5, 2010. (Be sure sufficient postage is on the envelope.)

NO FAXES ACCEPTED!

Questions may be directed to Ms. Olnhausen at 419-241-5049 or Joanne@toledocf.org