

## **RUTH ANN HACKLER SCHOLARSHIP APPLICATION**

The Alumni Committee of John P. St. John Memorial High School established a \$500 scholarship in honor of Mrs. Ruth Ann Hackler.

This one-year scholarship will be awarded to one graduating senior from Olathe North High School who meets the following requirements:

- The applicant must be enrolled at Olathe North High School
- The applicant must demonstrate financial need.

This scholarship will be paid in one disbursement of \$500.

This scholarship is administered by the Olathe Public Schools Foundation. The scholarship recipient must provide proof of enrollment at an educational institution prior to scholarship disbursements. Scholarship disbursements are made directly to the educational institution.

Applicants must fully complete the following application and synopsis and submit it to their school scholarship counselor by March 1, 2010. The scholarship will be presented at Senior Awards Night.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_

Home Phone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

University or college where you have been accepted: \_\_\_\_\_

### **Supporting Information:**

- Complete financial summary on page 2 of this application.
- On a separate sheet of paper, write a brief (100 words or less) synopsis outlining the field of study you intend to pursue.

**Financial Status:**

(Parent/Guardian) Please check the appropriate gross taxable income for last year:

- Less than \$35,000                       \$35,001 to \$55,000  
 \$55,001 to \$100,000                 over \$100,000

# of dependent children: \_\_\_\_\_ # of dependent children in college: \_\_\_\_\_  
Are any of these children receiving scholarships (full or partial)? \_\_\_\_\_

**Applicant's Anticipated College Costs for one year:**

Tuition: \$ \_\_\_\_\_  
Room & Board: \$ \_\_\_\_\_  
Books & Fees: \$ \_\_\_\_\_  
Personal Expenses: \$ \_\_\_\_\_  
  
Total College Expenses for One Year: \$ \_\_\_\_\_

**Estimate of Finances Available for one year:**

Parent/Guardian's Contribution: \$ \_\_\_\_\_  
Student's Savings: \$ \_\_\_\_\_  
Summer Earnings: \$ \_\_\_\_\_  
Scholarships Received: \$ \_\_\_\_\_  
Other Funding: \$ \_\_\_\_\_  
Total Available Assets \$ \_\_\_\_\_  
  
College Expenses for One Year \$ \_\_\_\_\_  
Total Assets \$ \_\_\_\_\_  
Difference (Expense minus assets) \$ \_\_\_\_\_

Are there any special or unusual circumstances that would indicate that you have special financial needs in order to attend college? \_\_\_\_\_  
\_\_\_\_\_

**Parent's Confirmation**

I have reviewed this form and this application is being made with my approval.

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_