



Crossroads High School

Local Scholarship Common Application



Class of 2018

First Name

Middle Name

Last Name

RELEASE OF INFORMATION:

I give my permission for the information contained in my scholarship notebook to be reviewed by scholarship screening committees. Yes No

Student Signature

Date

Parent/Guardian Signature

Date

DATE DUE: 4-20-2018



DATE RECEIVED _____

Crossroads High School
Common Application Scholarship Instructions:

Please read through the following instructions for the Crossroads High School Local Scholarship Common Application. It is amazing what our community has offered to support students in reaching their dreams upon graduation.

Step 1:

Hard copy applications will be available from Jennifer Foster. Handwritten responses should be completed using pen and best penmanship.

Please note that the following scholarship donors have additional requirements that must be met in order to be considered. The essays/documents required need to be included at the end of your Common Application.

- Granite Falls Education Foundation
- Granite Falls Friends of the Library
- Granite Falls Youth Soccer Club

Step 2: Complete application and include a copy of your transcript.

Step 3: Indicate on the attached Scholarship List which scholarships you are applying for.

Step 4: Turn in your completed application to the Jennifer Foster by **April 20th by 2:00PM.**

If an application is turned in after that date it will be noted at the bottom of the application.

Name: _____

The following is a list of local scholarship donors. Please review the awards and scholarships listed below and indicate with an "X" all of the scholarships you are applying for. **Return along with your scholarship application.**

Mark with an "X"	SCHOLARSHIP NAME	ALL applications require a complete application which includes the first 2 essays. Additional requirements and/or information are listed below
	Granite Falls Alumni Foundation	They are very interested in supporting applicants who want to go into technical training as well as students who plan to go to college.
	GFHS CTE Scholarship	Emphasis is placed on career pathway and CTE classes taken
	GFHS Education Association	Pursuing a career in education
	Mike Vier Memorial Scholarship Granite Falls Firefighters Association	
	Granite Falls Bethel Chapter No. 146 Order of the Eastern Star	
	Granite Falls Eagles	
	Granite Falls Eagles Louise Shelley Memorial Scholarship	
	Pilchuck Foundation -- Merlin C "Barney" Barnhardt Scholarship Program	Granite Falls School District senior pursuing a career in fire sciences or criminal justice: Athletic participation, community service
	Granite Falls Chapter Public School Employees (PSE)	Must be a son or daughter of a current PSE Granite Falls member.
	Granite Falls Lions Club	While grade point average is considered, it is not the only criteria used when choosing the scholarship recipients. Financial need is considered. They are interested in supporting applicants who want to go into technical training as well as student who plan to go to college.
	Granite Falls Chamber of Commerce Show "N" Shine Scholarship	Two letters of recommendation
	Granite Falls Education Foundation	School and community involvement 2 letters of recommendation, one of which is from a community member Essay on one of the topics: Views on education OR experience you have had which contributed to your desire to further your education
	Granite Falls Friends of the Library Scholarship	Essay entitled: "Why Reading is Important to Me". 2 or more letters of recommendation
	Granite Falls Historical Society	3.0+ GPA Two letters of recommendation Granite Falls Historical Society Scholarship favors those who plan on attending a 2 or 4 year college as well as those pursuing trade certifications.
	Mary Bayh Memorial Scholarship	3.0+ GPA Two letters of recommendation Mary Bayh Scholarship favors students pursuing a career in education
	Iron Mountain Quarry Scholarship	2.5 gpa or higher Two letters of recommendation One scholarship will be given to a student pursuing a career/technical/vocational education.
	Granite Falls Youth Soccer Club	Participation in the Granite Falls Youth Soccer Club or high school soccer. Attach additional explanation of soccer experience

Crossroads Local Scholarship Application

First Name

Middle Name

Last Name

Mailing Address: _____

Email: _____ Phone: _____

POST HIGH SCHOOL PLANS:

College or school you plan to attend: (list in the order of preference)

College/School: _____

Have you been accepted? Yes Applied, waiting Not yet applied

College/School: _____

Have you been accepted? Yes Applied, waiting Not yet applied

College/School: _____

Have you been accepted? Yes Applied, waiting Not yet applied

Career (s) you are pursuing:

Why have you selected your current career path (s) and what do you hope to accomplish?

Will you be attending school in the upcoming fall? Yes No

If you do not plan to attend school in the fall, please explain the reason:

PLEASE UPDATE COUNSELING CENTER WITH FINAL COLLEGE ACCEPTANCE

BACKGROUND INFORMATION:

Number of years you have attended Granite Falls School District? _____

U.S. citizen? Yes No

FATHER/GUARDIAN:

Do you live with your father? Yes No

If yes, please complete the following:

Name: _____

Phone: _____

Place of Employment: _____

Position: _____

Full-time Part-time

MOTHER/GUARDIAN:

Do you live with your mother? Yes No

If yes, please complete the following:

Name: _____

Phone: _____

Place of Employment: _____

Position: _____

Full-time Part-time

DEPENDENT STUDENTS:

List other members of your immediate family who will be attending any school during your freshman year of college.

State each of their ages and grade levels.

FIRST NAME ONLY	AGE	GRADE	FIRST NAME ONLY	AGE	GRADE
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

OTHER DEPENDENTS:

List other members in your household, such as a grandparent or other family member, if they were claimed on parents' previous year's tax return: _____

VETERAN in family:

Do you have a Veteran family member? Yes No

Relationship: _____

Service Branch: _____

Extracurricular Activities

In the left column, list your major activities since freshman year, including school related and non-school related. Mark an "X" in the appropriate grade level box for the year(s) during which you participated. In the right column, list any leadership positions you held as part of that activity or any contributions you made, and mark an "X" in the box for which grade level it occurred. You may attach additional sheets if necessary.

Student Activities	Grade				Leadership and/or Accomplishments	Grade			
	9	10	11	12		9	10	11	12
<i>Example: FBLA</i>	✓	✓	✓		<i>FBLA President</i>				✓
<i>Example: Soccer</i>	✓	✓	✓	✓	<i>Team Captain</i>				✓

Honors and Awards

List all honors and awards you have received since freshman year and give a brief description; then select the appropriate grade level and category box.

HONORS/AWARDS	Grade				DESCRIPTION	Academics	Athletics	Leadership	Other
	9	10	11	12					
<i>Example: Science Award</i>				✓	<i>Outstanding classroom achievement.</i>				✓

Community Service

List the ways in which you have served your community. Document all hours since freshman year, including items like Food Drive, tutoring, scouts, etc.

Community Service Location	Grade				DESCRIPTION	TOTAL HOURS
	9	10	11	12		
<i>Example: Boys & Girls Club</i>			✓	✓	<i>Tutored students</i>	<i>20</i>

Work Experience

List your most significant work experiences during high school. Begin with the most recent job you have held.

NAME and CITY of EMPLOYER	POSITION HELD	FROM MO./YR.	TO MO./YR.

Academics

What is your cumulative GPA? _____

Please attach a copy of your current high school transcripts.

Please indicate your test scores on the following tests:

SBAC ELA _____

Math EOC _____

SBAC Math _____

SAT Score and/or ACT Score _____

Anticipated Budget and Expenses

Please estimate **for next year**, your anticipated expenditures for college or schooling after high school.

Room and Board: \$ _____

Tuition: \$ _____

Fees: \$ _____

Books and Supplies: \$ _____

Transportation: \$ _____

Additional/Other Expenses: \$ _____

TOTAL EXPENSES \$ _____

Please explain any additional or other expenses: _____

List any financial aid, scholarships, or grants that you have received to date:

Financial Aid \$ _____

Grants: \$ _____

Scholarship: \$ _____

Statement of Financial Need:

Use this space if you would like to comment on your individual financial need. Please include examples of how you and/or your family plan to fund your education. Please see your counselor if you have any questions.

How do you expect to finance your college education? _____

What other scholarships have you applied for? _____

If you are applying for any of the following scholarships: Friends of the Library, Granite Falls Youth Soccer or Granite Falls Education Foundation, please include a typed essay that addresses the required prompt below:

- If you are applying for the Friends of Library Scholarship***, write an essay regarding “Why Reading is Important to Me.”

- If you are applying for the Granite Falls Youth Soccer Association Scholarship***, write an explanation regarding your soccer experience: playing, coaching, and/or refereeing.

- If you are applying for the Granite Falls Education Foundation Scholarship***, complete an essay (no more than 500 words) on **one** of the following topics:
 - What are your views on education? How do these views relate to your desire to attend college?
 - Give a personal experience you have had which has contributed to your desire to further your education.

Please include the prompt at the top of each essay.

Teacher Evaluation Form

(To be completed **and signed** by teacher/instructor. A letter of recommendation can replace this form.)

Student's Name: _____

Teacher's Name and School: _____

Signature: _____ Date: _____

BACKGROUND INFORMATION:

How long have you known this student?

What are the first words that come to mind to describe this student?

List the courses you have taught to this student and level of difficulty (AP, Honors, Sno-Isle, etc.).

RATINGS:

Compared to other students in his or her class this year, how do you rate this student in terms of:

NO BASIS		BELOW AVERAGE	AVERAGE	ABOVE AVERAGE	ONE OF THE TOP FEW
	Productive Class Participation				
	Maturity				
	Integrity				
	Concern for Others				
	Initiative, Independence				
	Intellectual Promise				
	Creative Original Thought				
	Disciplined Work Habits				
	Leadership				
	Reaction to Setbacks				
	Self Confidence				
	OVERALL				

Evaluation:

Please write additional comments you think are important about this student, including a description of academic and personal characteristics. We welcome information that will help us to differentiate this student from others.

Teacher Evaluation Form

(To be completed **and signed** by teacher/instructor. A letter of recommendation can replace this form.)

Student's Name: _____

Teacher's Name and School: _____

Signature: _____ Date: _____

BACKGROUND INFORMATION:

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Compared to other students in his or her class this year, how do you rate this student in terms of:

NO BASIS		BELOW AVERAGE	AVERAGE	ABOVE AVERAGE	ONE OF THE TOP FEW
	Productive Class Participation				
	Maturity				
	Integrity				
	Concern for Others				
	Initiative, Independence				
	Intellectual Promise				
	Creative Original Thought				
	Disciplined Work Habits				
	Leadership				
	Reaction to Setbacks				
	Self Confidence				
	OVERALL				

Evaluation:

Please write additional comments you think are important about this student, including a description of academic and personal characteristics. We welcome information that will help us to differentiate this student from others.

Community Member Recommendation Form

To be completed **and signed** by a community member. A community member is defined as an adult in a leadership capacity such as a volunteer coordinator, club advisor, coach, employer, youth leader or clergy. (This page can be replaced by a letter of recommendation, but letters of recommendation from family **will not** be accepted.)

Student's Name: _____

Evaluator's Name: _____

Phone Number: _____

Signature: _____ Date: _____

BACKGROUND INFORMATION:

How long have you known this student and in what capacity?

What are the first words that come to you mind to describe this student?

We value your perspective of the student's personal qualities and contributions to the community. What would you like us to know about the student that we might not otherwise learn?