



For Barberton residents graduating from high school.

**Submission Deadline: Monday, March 16, 2020**

**A. School Information**

I have been accepted to: \_\_\_\_\_

Degree Sought: \_\_\_ Bachelor's \_\_\_ Associate's \_\_\_ Certificate

**B. Personal Information**

Name: \_\_\_\_\_  
First Middle Last

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

Email: \_\_\_\_\_ Birth Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Gender: Male \_\_\_ Female \_\_\_ Social Security #: \_\_\_\_\_

Number in household (including yourself) \_\_\_\_\_

Employment: (Where, how long, approximate hours per week) : \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**C. Financial Information**

It is recommended that the applicant ask for assistance from the family members filling out the appropriate financial information. Please mark each space provided.

Parents' Occupations: \_\_\_\_\_

Family Income (all sources):  
 \_\_\_\_\_ Under \$20,000      \_\_\_\_\_ \$50,001-\$75,000  
 \_\_\_\_\_ \$20,001-\$35,000      \_\_\_\_\_ over \$75,000  
 \_\_\_\_\_ \$35,001-\$50,000



Applicant Last Name: \_\_\_\_\_

Number of children in the family including applicant: \_\_\_\_\_

Their age(s): \_\_\_\_\_

Number of children currently in college who are supported by the family: \_\_\_\_\_

Are you a first generation college student? (First generation defined as the first in your family, either biological, custodial or guardian to attend and graduate college with a Bachelors Degree) \_\_\_\_\_

How do you plan to finance your college tuition, room and board, books and fees? In space below, please explain any extenuating circumstances in your family which you feel should be considered by the scholarship committee:

**D. School Information**

I intend to major in: \_\_\_\_\_

List all college(s) to which you've applied and been accepted: \_\_\_\_\_

I plan to enroll: \_\_\_ **Full-time** \_\_\_ **Part-time**

I plan to work: \_\_\_ **Full-time** \_\_\_ **Part-time** \_\_\_ **Not working**

How many credit hours will you carry each semester? \_\_\_\_\_ Expected graduation date: \_\_\_\_\_

High School graduated from: \_\_\_\_\_

Received a score of 21 or higher on the ACT (if yes, please attach a copy of your high school transcript or verifying document): \_\_\_\_\_



**E. Essay**

Write a brief paragraph describing or outlining a significant volunteer experience you had. Include details regarding what you valued or learned from this experience.

Write a brief paragraph describing your academic and career goals for the future:

List any school or non-school activities, clubs, sports, honors and service endeavors. Indicate any leadership positions held (attachments are acceptable).



Applicant Last Name: \_\_\_\_\_

**Application Checklist**

*All documents below must be included with application unless otherwise noted*

Include with application:	Instructions	Check if included
Official High School Transcript	This <b>must</b> include your ACT score	
One letter of recommendation	Ask your employer, professor, teacher, religious figure or community leader for a letter of recommendation that is <b>typed and on official letterhead</b> . We cannot accept recommendations from friends or family members.	
Essay	Typed essay, which clarifies and exhibits your goals, while explaining any special circumstances that hindered your education.	
Two teacher evaluations	These <b>must</b> be included.	
Proof of Residency	<p><b>Applicants must have lived within the City of Barberton for at least the previous four continuous years.</b></p> <p>Submit photocopies of:</p> <ul style="list-style-type: none"> <li>• Driver's License showing Barberton residence</li> <li>• For past five years: either copies of W2's or City of Barberton Income Tax form (<i>first page only</i>)</li> </ul>	
Copy of this page	Signatures and permission for release of information	

**Signature:**

I certify that all statements in this application are true and correct.

\_\_\_\_\_

Print name

\_\_\_\_\_

Signature

\_\_\_\_\_

Date

**Permission for release of information:**

I, \_\_\_\_\_, grant permission to the Barberton Community Foundation,  
(full name)

to request information from \_\_\_\_\_ pertaining to my grade report, transcript or financial aid.  
(name of school)

\_\_\_\_\_

Signature

\_\_\_\_\_

Date



**Additional Information**

*Do not submit this page*

**A selection committee will review applications.**

**Decisions are based on the following:**

- **Barberton resident**
- **A score of 21 or higher on the ACT**
- Well defined academic and career goals – as described in essay
- Demonstration of initiative and responsibility – shown in transcript, essay and recommendation
- Written communication – organization and clarity of essay and application
- Financial need is a consideration
- Academic performance and attendance

**Application Due Date: Monday, March 16, 2020**

**Mail the completed application to:**

BCF Resident Scholarship  
Barberton Community Foundation  
Attention: Carrie Herman  
460 West Paige Avenue  
Barberton, Ohio 44203

**Incomplete applications will not be considered**

Applicants will be notified sometime after April 30, 2020

*Please retain a copy of this application and any other materials you may need for your records, as we are unable to return documents to applicants. Recipients and non-recipients will be notified 4 to 5 weeks after the application deadline. In order to process applications, **all required documents must be enclosed with your application.** Please do not send paperwork separately. Make sure your name is printed clearly on all enclosures.*