



## 2012 DAVID SCHOLAR APPLICATION INSTRUCTIONS

(Please do **NOT** include this page with the application)

### **Introductory Information**

The Paul & Carol David Foundation is proud to award academic scholarships each year to deserving **high school students attending Stark County, Ohio high schools**. Scholarship recipients will receive the sum of \$5,500 annually (paid directly to the college or university) from the Foundation to be applied to the cost of attendance as determined by each accredited college or university in the continental United States. The scholarship funds may be used to offset unmet need not covered through other scholarships or grants and, then, used to reduce any loans. In order to maintain his or her eligibility, a scholarship recipient must complete a minimum of twelve (12) credit hours **and** maintain a minimum cumulative grade point average of 2.5 on a 4.0 scale for each grading period. A recipient who fails to achieve the minimum cumulative grade point average and/or falls below twelve (12) credit hours for one grading period receives a warning from the Foundation. If he or she then fails to achieve this minimum for a second grading period, he or she is no longer eligible to receive scholarship funds. A recipient who continues to maintain his or her eligibility will be entitled to receive scholarship funds for a period of eight (8) semesters or twelve (12) quarters, as applicable. At the discretion of the Foundation, a recipient may be entitled to take a sabbatical from his or her college studies, without forfeiting the scholarship, provided that the recipient notifies the Foundation, in advance, in writing and shows good cause regarding the necessity of a sabbatical.

In order to qualify for a Foundation scholarship, interested high school students must submit a **completed** application package to the Foundation, **postmarked no later than April 16, 2012, of their senior year**. The Foundation reviews all applications submitted and evaluates each applicant on the basis of merit, as well as financial need. In selecting scholarship recipients, the Foundation focuses on the following factors (listed in order of importance): *an applicant's financial need; academic performance and teacher evaluations; character and personal goals; and extracurricular and community activities and awards.*

### **The Foundation must receive the following from each applicant by the April 16<sup>th</sup> deadline:**

1. The completed original application, signed by applicant **and** his or her parent(s) or legal guardian(s), along with the following attachments:
2. A copy of the first two pages of the most recent federal tax return (i.e. 1040) of applicant's parent(s) or legal guardian(s), attached as indicated in the application. **NOTE:** In instances where parents file separate returns, a copy of each parent's tax return is required. **If parents are separated or divorced, a tax return must be submitted for both parents or guardians.** (*The Foundation will accept tax information separately in order to maintain confidentiality of each parent*). If parent(s) or guardian(s) are self-employed, a copy of Schedule C, Schedule F, etc. is required with a copy of the tax return;
3. A copy of the **FULL** Student Aid Report (SAR) from the Free Application for Federal Student Aid (FAFSA) report, showing the Expected Family Contribution (EFC);
4. **Copies of the financial aid award letters received from the colleges being considered** (*if the letters are not available before the application deadline, please send separately as soon as received*);
5. Two completed teacher evaluations, signed and placed in signed, sealed envelopes by the evaluator and forwarded to the Foundation;
6. A copy of applicant's official high school transcript, **showing test scores**, placed in a signed, sealed envelope by the school and forwarded to the Foundation;
7. Completed personal statement essay questions as requested in the application; and
8. **In addition to the original application and attachments, TWO copies of:** the completed application, tax return information, Student Aid Report, financial aid award letters, and essays, with each complete set of copies being stapled together (***NO binders or notebooks, please***). There should be a total of three sets of the application – one original set and two copies.

***IMPORTANT NOTE:*** *Due to the number of scholarship applications received, it is the applicant's responsibility to ensure that all forms, attachments, etc. are completed and provided in their entirety. Applications received without all required information or postmarked after April 16<sup>th</sup> will **not** be considered.*

The Foundation will hold all information that it receives with respect to scholarship applications in the strictest confidence and will only use such information for internal purposes, unless an applicant directs otherwise. All applications and related information should be mailed to the following address:

**Paul & Carol David Foundation, c/o David Scholar, 4048 Dressler Road NW, Suite 200, Canton, Ohio 44718**

The Foundation will post the names of all David Scholar award recipients on our website at [www.davidscholar.org](http://www.davidscholar.org) by June 15, 2012. The Foundation appreciates the interest of all applicants and wishes them good luck in the selection process and in their future endeavors. Please call (330) 479-0200 with any questions.



**A. Student Information**

First Name:		Middle Initial:	Last Name:	
Street Address:				
City:	County:	State:	Zip Code:	
Home Telephone No.:	Cell Phone No.:		E-Mail Address:	
Date of Birth:		Social Security No.:		
Male: <input type="checkbox"/> Female: <input type="checkbox"/>			Citizenship Status:	
High School Currently Attending:			Year of Graduation:	

**B. Family Information**

Please list both parents below, even if one or more is deceased or no longer has legal responsibilities toward you. If you are a minor with a legal guardian (an individual or government entity), then please list that information and attach as an additional sheet. If you wish, you may list step-parents and/or other adults with whom you reside, or who otherwise care for you on an additional sheet, as well.

PARENT 1		PARENT 2	
Name:		Name:	
Relationship to Applicant:		Relationship to Applicant:	
Address (if different from applicant):		Address (if different from applicant):	
Employer:	Occupation:	Employer:	Occupation:
*2011 Annual Income: <i>(Include salary, commission, wages, company draws, etc.)</i>		*2011 Annual Income: <i>(Include salary, commission, wages, company draws, etc.)</i>	
*If Annual Income is less than \$20,000, please explain:			
Parents' Marital Status <i>(relative to each other)</i> : Never Married <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced (date: ____ ) <input type="checkbox"/> Widowed <input type="checkbox"/>			
Additional Parental Information <i>(Please check all that apply)</i> : One or more parent is: Deceased <input type="checkbox"/> Disabled <input type="checkbox"/> Retired <input type="checkbox"/>			
Explanation <i>(Optional)</i> :			

**Sibling Information**

Please give names and ages of your brothers and/or sisters. If they are enrolled in grades K-12, list their grade levels. If they have attended or are currently attending college, give the names of the undergraduate institution. *Please attach a separate page if you need more space.*

Name	Age	Grade Level	College or University (if applicable)	Living at home? (Yes or No)

Has any member of your family previously received a Paul & Carol David Foundation Scholarship? Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please list the name(s) of the recipient(s) and the date(s) of the award:



**C. Financial Profile**

Household Income Information

Please attach a copy of the first two pages of the most recent federal income tax return for **ALL parents or legal guardians who have provided you with financial support (including child support) within the past 12 months.** (NOTE: Federal income tax returns include IRS Form 1040, 1040A, 1040EZ, TeleFile Tax Record, or a foreign income tax return.) **If parent(s) or legal guardian(s) are self-employed, a copy of Schedule C, Schedule F, etc. from their income tax return must accompany this application.**

Please list the total amount of taxable income for the past tax year of **ALL parents or legal guardians who have provided you with financial support, including child support,** in the past 12 months:

Name of Parent or Legal Guardian	Total Amount of Taxable Income
	\$
	\$

Please list all untaxed income received during the past tax year by all parents or legal guardians who have provided you with financial support in the past 12 months:

Type of untaxed income (for example, child support, non-taxed social security, welfare including TANF, proceeds from life insurance policies)	Annual Amount Received
	\$
	\$
	\$

What is the Expected Family Contribution (EFC) amount from the Student Aid Report (SAR) on the Free Application for Federal Student Aid (FAFSA) form? (A copy of the **FULL** SAR must be included with this Application.) \_\_\_\_\_

What is the total annual amount of financial assistance that you anticipate receiving from your parent(s), legal guardian(s), other family members, or any college savings accounts during each college year? (Do not include the college savings amount included in the question below): \$ \_\_\_\_\_ per year

Please list the total amount of any college savings plan that you have: \_\_\_\_\_

Please list any other scholarships that you have applied for or anticipate applying for and the amount awarded by any such scholarship:

Name of Scholarship	Amount Awarded	Annual or One-Time	Application Status (Intend to apply for, granted, denied)
	\$		
	\$		
	\$		
	\$		

Through what other means do you intend to finance your college education? (For example, by working while in college)





Please list all employment experiences that you have had during high school:

Employer	Position Held	Years of Employment

**F. Honors**

Please list any honors that you have received during high school, including any academic or community awards or citations:

Description of Honor	Year Awarded

**G. College/University Information**

Please list all colleges and universities to which you are considering applying (in order of preference), including the amount of annual tuition, the annual cost of room and board (if you will be living on campus), and whether you have applied and/or been accepted to the institutions listed:

	Name of Institution	Annual Tuition	Annual Cost of Room and Board	Applied Y/N	Accepted Y/N	Institutional Grant or Scholarship Amount
1 <sup>st</sup> Choice		\$	\$			\$
2 <sup>nd</sup> Choice		\$	\$			\$
3 <sup>rd</sup> Choice		\$	\$			\$
4 <sup>th</sup> Choice		\$	\$			\$
5 <sup>th</sup> Choice		\$	\$			\$

What is your intended field of study?



**H. Personal Statement Essays**

Your personal statement essays are an opportunity for you to tell us something about yourself that we may not be able to learn from the other information we have and may allow us to distinguish you from other applicants. Please answer all of the following questions. Attach your responses to this application on separate sheet(s) of paper. We recommend that your responses be a minimum of 250 words in length for each question, although this is not a formal requirement.

Answer all of the following:

1. **Who in your life has been your biggest influence and why?**
2. **How has your family background affected the way you see the world, positively and/or negatively?**
3. **Briefly describe your long and short-term goals and how you plan to achieve those goals.**

**I. How did you hear about the David Scholar Program? Please check all that apply.**

- |  |   |  |
|--|---|--|
| Friend or Family Member <input type="checkbox"/> | High School Guidance Counselor <input type="checkbox"/> | College Financial Aid Counselor <input type="checkbox"/> |
| Local Newspaper <input type="checkbox"/>         | High School Newspaper <input type="checkbox"/>          | David Scholar Recipient <input type="checkbox"/>         |
| Internet Search <input type="checkbox"/>         | David Scholar Website <input type="checkbox"/>          | Financial Aid Night <input type="checkbox"/>             |
| David Scholar Brochure <input type="checkbox"/>  | Other ( <i>Please explain</i> ): _____                  |  |

**Disciplinary History**

Have you ever been found responsible for a disciplinary violation at any educational institution you have attended from the 9th grade forward, whether related to academic misconduct or behavioral misconduct, that resulted in a disciplinary action? These actions could include, but are not limited to: probation, suspension, removal, dismissal, or expulsion from the institution. Yes  No

Have you ever been adjudicated guilty or convicted of a misdemeanor, felony, or other crime? Yes  No   
[Note that you are not required to answer "Yes" to this questions, or provide an explanation, if the criminal adjudication or conviction has been expunged, sealed, annulled, pardoned, destroyed, erased, impounded, or otherwise ordered by a court to be kept confidential.]

If you answered "Yes" to either or both questions, please attach a separate sheet of paper that gives the approximate date of each incident, explains the circumstances, and reflects on what you learned from the experience.

**Note: Applicants are expected to immediately notify the Foundation should there be any changes to the information requested in this application, including disciplinary history.**

**Signature of Applicant**

I certify that, to the best of my knowledge, the information provided in this application and accompanying materials are complete and accurate and are my own work, factually true, and honestly presented. I understand that any misrepresentation or omission of facts in this application may be cause for the Paul & Carol David Foundation to deny this application or to rescind any scholarship awarded to me.

By signing this Application, I hereby agree to the following:

- Any financial aid information available from the colleges or universities that I have applied to may be released to the Foundation in order to assist in determining the amount of my financial need.
- Information regarding my name, high school attended, college attending, and field of study, along with any photographs of David Scholar recipients, may be used to help promote the scholarship program.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date



**Waiver of Applicant and Parent/Legal Guardian**

I, \_\_\_\_\_, hereby give my permission for the release of the school records of  
(Name of Parent or Guardian)  
\_\_\_\_\_ to the Paul & Carol David Foundation for the purpose of application  
(Name of Applicant)  
for a Paul & Carol David Foundation scholarship.

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

\_\_\_\_\_  
Signature of Parent/Legal Guardian Date Revised 10/10/2011



# DAVID SCHOLAR

## TEACHER EVALUATION FORM

### Applicant Information

First Name:	Last Name:
Name of High School Attending:	

***To the Applicant:*** It is required that you submit two teacher evaluations as part of your scholarship application. Please have two teachers of your choice complete this evaluation form and return it with your application. We recommend that you have teachers who know you well complete your evaluations.

***To the Evaluator:*** Thank you for assisting the Paul & Carol David Foundation in its scholarship evaluation process. The Foundation awards annual academic scholarships on the basis of an applicant's:

- *financial need;*
- *academic performance and teacher evaluation;*
- *character and personal goals; and*
- *extracurricular and community activities and awards.*

**NOTE: This evaluation is not to be shared with the applicant. Please sign the completed form and place it in a sealed, signed envelope before returning it to the applicant.**

To assist us with our assessment of this applicant, please rate the applicant in the areas listed below, keeping in mind that the Foundation will use these ratings to compare the applicant with other very able students. Please rate him or her as accurately as you can, relative to your other college preparatory students.

	Below Average	Average	Good	Excellent (top 10% but not top 2-3%)	Truly Outstanding (top 2-3%)	No Basis for Judgment
Judgment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-Confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Warmth of Personality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sense of Humor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Concern for Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Energy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reaction to Setbacks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Respect Accorded by Faculty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creative Qualities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-Discipline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Growth Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Please write a brief summary appraisal of the applicant, assessing his or her academic and personal qualities and promise as a student. We are particularly interested in evidence of character, maturity, integrity, independence, values, unique interests, and any special talent or quality this applicant possesses. Avoid listing the applicant's activities, which are available elsewhere. We are interested in **specific** events and unusual circumstances that will give us added insight into the strengths and weaknesses of the applicant. (Note: For your convenience, this section may be typed on a separate sheet.)

I recommend this applicant:

	Do Not Recommend	Without Enthusiasm	Fairly Strongly	Strongly	Enthusiastically
For academic promise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
For personal character promise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall recommendation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Teacher Information

First Name:	Last Name:
Title/Department:	Length of time acquainted with applicant:

\_\_\_\_\_  
Signature of Teacher

\_\_\_\_\_  
Date



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To assist us with our assessment of this applicant, please rate the applicant in the areas listed below, keeping in mind that the Foundation will use these ratings to compare the applicant with other very able students. Please rate him or her as accurately as you can, relative to your other college preparatory students.

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Respect Accorded by Faculty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creative Qualities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-Discipline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Growth Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



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For personal character promise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall recommendation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Teacher Information

First Name:	Last Name:
Title/Department:	Length of time acquainted with applicant:

\_\_\_\_\_  
Signature of Teacher

\_\_\_\_\_  
Date