**2025 SCHOLARSHIP APPLICATION FORM**

**APPLICANT INFORMATION**

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

*Last First Middle*

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   
City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Students Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parents Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Can I text you? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**HIGH SCHOOL INFORMATION**

High School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   
Rank: \_\_\_\_\_\_\_\_\_ in a class of \_\_\_\_\_\_\_\_\_ GPA: \_\_\_\_\_\_\_\_\_\_ Graduation Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***\*Please include a copy of your transcript in a sealed envelope. If you are a college student please attached a copy of your college transcript or copy of your classes and grades.*  
UNIVERSITY / COLLEGE / COMMUNITY COLLEGE INFORMATION**

List the names of Universities, Colleges, or Community Colleges to which you have applied.

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Accepted? \_\_\_\_\_\_\_\_ Application Pending? \_\_\_\_\_\_\_\_\_
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Accepted? \_\_\_\_\_\_\_\_ Application Pending? \_\_\_\_\_\_\_\_\_
3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Accepted? \_\_\_\_\_\_\_\_ Application Pending? \_\_\_\_\_\_\_\_\_

Proposed area of study: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**UNIVERSITY / COLLEGE / COMMUNITY COLLEGE INFORMATION**

Name of Universities, Colleges, or Community Colleges to which you are or have attended.

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Years attended: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Years attended: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Area of Study: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SCHOOL AND COMMUNITY ACTIVITIES**

Using the space below, please list extracurricular, community and/or religious activities you participated in during the last four years. **Please list in the order of importance to you.**

|  |  |  |
| --- | --- | --- |
| **ACTIVITY** | **YEARS** | **LEADERSHIP POSITION(S)/ AWARDS** |
|  |  |  |
|  |  |  |
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|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**ACADEMIC HONORS:**

|  |  |
| --- | --- |
| **HONOR OR AWARD** | **YEAR RECEIVED** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

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**WORK HISTORY**

|  |  |  |  |
| --- | --- | --- | --- |
| **EMPLOYER** | **POSITION** | **DATES OF EMPLOYMENT** | **HOURS PER WEEK** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

I acknowledge the information in this application is correct to the best of my knowledge. I hereby grant permission to the Bedford Community Foundation to seek verification of any information provided in this application from any source for review by the officers and directors of the Foundation for use in selection of scholarship recipients. I further understand that no son or daughter of a member of the selection committee shall be granted a scholarship from the Foundation. Applicants must be a resident/student in Bedford Township or the immediate surrounding areas.

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

Signature of Parent *(if applicant is under 18)*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***To complete your application, you must include the following:***

1. Your most recent cumulative transcript in a sealed envelope.
2. A copy of a University, College, or Community College acceptance (if available).
3. Two letters of recommendation from faculty of choice.
4. A short essay outlining how the scholarship will be used and how it will help achieve your educational goals and objectives.

Deliver ALL documents, and this application, postmarked on or before **Friday, April 4, 2025,** to:

Bedford Community Foundation

ATTN: Scholarships

PO Box 54

Lambertville, MI 48144

**INCOMPLETE APPLICATIONS, APPLICATION WITH MISSING DOCUMENTS OR APPLICATION RECEIVED AFTER THE AFTER APRIL 4, 2025, DATE WILL NOT BE REVIEWED.**

**Announcement of Scholarships:** Scholarship award winners will be directly notified.

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