



## **Eternal Scholarships Application**

**This application is for an Endowed Scholarship for Tri Star Career Compact Students to further their education. The funds are held at the Mercer County Civic Foundation in Celina. An endowed scholarship is one that is initially funded and then invested so that the scholarship will not only last forever but continue to grow over time so more can be given to deserving students. This year we are offering five scholarships for a minimum of \$1,000 each. Keep in mind that you may also reapply for this scholarship after you leave Tri Star and continue your education.**

**Please complete this application and ONLY submit it to the office at Tri Star by April 1.**

**We are aware that you may not have all the information that this application asks for at the time you submit it, particularly on the Financial Aid portion on the last page. Please fill it out as completely as you are able. Some of the figures may be provided at a later date, either by you or by the schools.**



## Eternal Scholarships Application

**First Name** \_\_\_\_\_ **Last Name** \_\_\_\_\_

**Address** \_\_\_\_\_ **Apt/Suite#** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Email Address** \_\_\_\_\_ **Phone Number** \_\_\_\_\_

**Have you previously received a Tri Star Eternal Scholarship?** Yes \_\_\_\_\_ No \_\_\_\_\_

**If you answered yes, what year did you receive your scholarship?** \_\_\_\_\_

**Parent/Guardian #1 Name** \_\_\_\_\_

**Street Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Parent/Guardian #1 Employer** \_\_\_\_\_

**Parent/Guardian #2 Name** \_\_\_\_\_

**If Parent/Guardian #2 address information is different than #1, please include it below:**

**Street Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Parent/Guardian #2 Employer** \_\_\_\_\_

**Name of Home High School** \_\_\_\_\_

**Are you enrolled at Tri Star Career Compact?** Yes \_\_\_\_\_ No \_\_\_\_\_

**Class Rank:** \_\_\_\_\_ out of \_\_\_\_\_

**Current high school grade point average** \_\_\_\_\_

**Current Tri Star grade** \_\_\_\_\_

**Cumulative grade point average** \_\_\_\_\_

**Attendance (list days absent from Tri Star program – grade 12)** \_\_\_\_\_

**Name of Accredited Training Facility/College or University you plan to attend:** \_\_\_\_\_

\_\_\_\_\_

**Major/degree/training you plan to pursue:** \_\_\_\_\_

**Current Employer, if applicable:** \_\_\_\_\_

**Job title/duties if applicable:** \_\_\_\_\_

**Any other work history:** \_\_\_\_\_

\_\_\_\_\_

**List any volunteer work or community services you've been involved in:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**List any school activities or church/youth groups you're involved in:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Write an essay telling how a special person or event in your life has influenced your decision to pursue an advanced education or accredited training. Please include your future plans within the essay (you may attach a separate sheet if needed):**

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\_\_\_\_\_

**Are you receiving any other scholarships? (Students must report all other scholarships or grants they receive to the MCCF. Failure to do so could result in loss of this scholarship.)**

**College Grants/Scholarships applied for:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**College Grants/Scholarships awarded:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please attach:**

- 1. A copy of your high school transcript**
- 2. A letter of reference from a school personnel**
- 3. A letter of reference from a non-family-related community member**

**Certification**

**By signing and dating below, I certify that all the information I have provided is correct and accurate to the best of my knowledge. I also understand the parameters set forth by this scholarship and agree to adhere to them. \***

**I agree**

**Student's Full Name**

**Date**

\_\_\_\_\_

\_\_\_\_\_

**Parent/Guardian's Full Name\* Date\***

\_\_\_\_\_

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