

The William and Dorothy Judah Scholarship Fund

Applications must be received by 5:00 p.m., Friday, April 30, 2010

Eligibility & Selection Criteria:

1. Thurston County high school graduates attending a Washington public college or university. Those attending private colleges are not eligible for this award.
2. Preference will be given to those pursuing a career in teaching.
3. Selection will be based on merit. Merit is determined by using the following factors:

- ◆ Demonstrated Academic Ability: Must have demonstrated a capacity to succeed in school.
- ◆ Career Goals: How the scholarship contributes to your future career goals. Preference will be given to those entering the teaching profession.
- ◆ Extracurricular Activities/Community Service: Volunteer projects and active participation in school activities.
- ◆ Life Experience: Voluntary or paid work experience.
- ◆ Applicant Appraisal: Two letters of recommendation of which one must be from a teacher/advisor and one from someone who can comment on your overall character, achievement and promise.
- ◆ Other. Special circumstances such as family, financial or personal problems which may make you more worthy of consideration.

3. Awards generally will not generally exceed \$1,000.

Please contact The Community Foundation of South Puget Sound at 360.705.3340, or email akirske@thecommunityfoundation.com , if you have any questions regarding this scholarship.

WILLIAM AND DOROTHY JUDAH SCHOLARSHIP APPLICATION

ALL the following items must be received by 5:00 p.m., Friday, April 30, 2010. Collate and submit one original and one copy of the entire application. Do not use binders, report covers, folders or staples.

- ◆ This Application Form
- ◆ Personal Statement
- ◆ 2 Letters of Recommendation
- ◆ Grade Transcript & SAT scores
- ◆ Copy of Student Aid Report from the FAFSA

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|---------------------------------------|-------------------------------|---------------------------------------|---|
| Date of Birth: _____ | | Sex: _____ | |
| Name: _____ | | County of Residency: _____ | |
| <small>First</small> | <small>Middle Initial</small> | <small>Last</small> | |
| Mailing Address: _____ | | Email Address: _____ (print clearly) | |
| <small>Street</small> | <small>City</small> | <small>State</small> | <small>Zip</small> |
| Telephone No.: (____) _____ | | Alternate Telephone No.: (____) _____ | |
| Temporary Address: _____ | | | |
| <small>If Applicable</small> | <small>Street</small> | <small>City</small> | <small>State</small> <small>Zip</small> |
| Temporary Address Effective: _____ | | From: _____ To: _____ | |
| <small>If Applicable</small> | | | |
| Temporary Telephone No.: (____) _____ | | | |

| | | | | | |
|---|--|---------------------------------|--|---------------------------------|--|
| High School: _____ | | Expected Graduation Date: _____ | | SAT Score: _____ | |
| Four-year Institution you are planning to attend: _____ | | Choice 1: _____ | | | |
| | | <small>Name</small> | | <small>City</small> | |
| | | Choice 2 (if any): _____ | | | |
| | | <small>Name</small> | | <small>City</small> | |
| Major: _____ | | Degree: _____ | | Expected Graduation Date: _____ | |

Please mail to The Community Foundation of South Puget Sound, attn: Judah Scholarship Fund, 111 Market St NE, Suite 375, Olympia, WA 98501. If you have any questions please call (360) 705-3340.

I certify all of the information I have provided in this application is true to the best of my knowledge.

Signature Date

Parent/Guardian (if under 18 years): _____
Signature

Do not write below this line - For official use only

Date Received: _____ Amount Awarded: _____

Date Action Taken: _____

Comment/Notes: