

## Kevin Thompson Scholarship

2016 Application New and Returning Applicants

Date of S	Submission:	

**Directions:** Please type or print (using blue or black ink). Illegible applications will not be considered.

PERSONAL INFO	RMATION						
NAME:							
	Last		First			Middle	
AGE:	,	/ /		SEX:	Μ [	] F	: [ ]
	<i></i>	Date of Birth			•	-	
ADDRESS:							
		Street		City		State	Zip
CONTACT: (							
	Phone N	umber		e-ma	il Addres	S	
EARAU VINIEODA	ATION! /	-44	-lt£	:£		\	
	IATION (you may						
Are you related	l to anyone on th	ne ACEF staff o	or Board of D	irectors? Ye	es [	] No	[ ]
PARENT/LEGAL	GUARDIAN'S N	4ΜE(s):					
455556							
ADDRESS:		Street		City		Ctata	7:
CONTACT: /	1			City		State	Zip
CONTACT: (		ne Number			e-mail Ad	dress	
	_						
Number of sibl	ngs:	Number o	of family men	nbers currentl	y atten	ding colle	ege:
Highest level of	education com	pleted by you	r parent/lega	l guardian/sib	lings?		
	ool: High scl					aduate De	gree:
EDUCATIONAL I	NFORMATION (yo	ou may attach a	nother sheet o	of paper if you	need mo	ore space	)
What school do	you currently atte	end?				GPA:	
Name and city/s	tate of any other	high schools or	colleges atten	ded:			
				·			
vviiat college Wil	I you attend in the	C 1411!					
What do you pla	n to major in?						
Freshman	] Sop	homore [	] Junior	[ ]	Senior	[ ]	
ACT C	omposite Score:		SAT To	tal Score:			



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Approximate ex	penses you plan to incu	r per semester:		
Tuiti	on: \$	Room & Board: \$		
Bool	<b>(S:</b> \$	Other (please describe below): \$		
dditional fina	incial assistance you e	xpect to receive per semester:		
Othe	er Scholarships/Grant	s (please list below): \$		
Pers	onal: \$	Student Loans: \$		
	onal: \$ ily: \$			
Fam 		Other (please describe below): _\$		
Fam 	ily: <u>\$</u>	Other (please describe below): _\$		



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New and Returning Applicants

Date of Submission:	

<b>Directions:</b> Please type or print (using blue or black ink). Illegible applications will not be considered.
HONORS, AWARDS, & ACTIVITIES (you may attach another sheet of paper if you need more space)
Please list/describe academic or community honors/awards you have received during high
school or college:
Please list/describe any sports, clubs, hobbies, outside interests, etc you have:
Please list/describe any community service or leadership activities you participate in:
Please list/describe any work experience (including unpaid) and the dates worked:



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#### **PERSONAL STATEMENTS**

Please choose one of these questions to write a 1-2 page essay on:

1. Describe the importance of music or music education in your life, and how it has shaped your future goals.

OF

2. Describe a person or event who has had a major role in your education, and how that will impact how you approach the beginning of college. (new applicants only)

OR

3. Describe how your college experience so far has changed or reinforced your future career plans. (returning applicants only)

Your essay should be typed, double spaced, and 12-pt Times New Roman font. Please carefully proofread your essay to ensure there are no grammatical errors.

AP	PLICATION CHECKLIST
	Completed Application Form (5 pages, typed or neatly printed in blue or black ink)
	Personal Essay (1-2 pages, typed, double spaced, 12-pt Times New Roman font)
	<b>Letters of Recommendation</b> (First Time Applicants: 2 Letters, at least one from a high school teacher, counselor, or principal. Returning Applicants: 1 Letter, from a current teacher, adviser, coach, etc)
	<b>Most Recent Official Transcript</b> (photocopy is acceptable if signed by principal or guidance counselor)
	<b>Community Service Hours</b> (please document at least 20 hours of community service during your time in high school; returning applicants should show 40 hours over the course of the past year. These should be signed by a program supervisor)
	<b>Proof of College Acceptance or Enrollment</b> (if you have not yet received this, any award you receive will be conditional upon proof of admission) [ ] <i>I have not yet received my acceptance.</i>



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need-based educational resources.		
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STATEMENT of ACCURACY		
I hereby affirm that the above information provided by me is true and	d correct to the best of my	
knowledge. I also consent that my picture may be taken and used for any purpose deemed necessary		
to promote the Foundation's scholarship program.		
I understand that if chosen as a scholarship recipient, I must provide evidence of enrollment/registration at the post-secondary institution of my choice before scholarship funds can be awarded		
Student Signature:	Date:	
Parent/Legal Guardian Signature:	Date:	