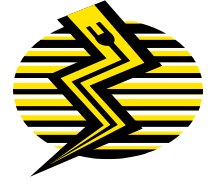




# KRUS MEMORIAL SCHOLARSHIP APPLICATION FORM



## Statement of Completion

This application must be accompanied by ALL information listed in the attached instructions and postmarked by April 15<sup>th</sup> to be eligible.

Utility: \_\_\_\_\_ Qualifying Utility Employee: \_\_\_\_\_

## PERSONAL INFORMATION

Name: \_\_\_\_\_ Nickname: \_\_\_\_\_  
(Last) (First) (Middle)

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

How did you learn about this scholarship: \_\_\_\_\_

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

## APPLICANTS ACADEMIC INFORMATION

Education Level Currently Attained: \_\_\_\_\_

College you plan to attend or currently attend: \_\_\_\_\_

Anticipated area of study: \_\_\_\_\_

A. Income of parent(s)/guardians:

\_\_\_\_\_ Above \$75,000 per year

\_\_\_\_\_ Between \$60,000 & \$75,000 per year

\_\_\_\_\_ Between \$40,000 & \$60,000 per year

\_\_\_\_\_ Between \$20,000 & \$40,000 per year

\_\_\_\_\_ Below \$20,000 per year

B. \_\_\_\_\_ Indicate number of members in your family who will be attending college the next school year.

C. \_\_\_\_\_ Indicate number of children in your family who will be at home during the coming school year.

D. \_\_\_\_\_ In the space below, list other scholarships/grants for which you have applied and note with a check any scholarships already received. (Use an additional sheet if needed)

<u>Name of Scholarship/Grant</u>	<u>College/Organization</u>	<u>Amount</u>

Previously applied to KRUS? \_\_\_\_\_ If yes, Date: \_\_\_\_\_ Received KRUS Scholarship Award? \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

## **KRUS MEMORIAL SCHOLARSHIP REQUIREMENTS**

1. Applicants must fully complete the application and sign the form. Form must be completed in ink or typewritten. Incomplete applications will not be considered for a scholarship.
2. Applicants must provide proof of acceptance by a two or four year college, university or vocational/technical school.
3. Applicants must provide **TWO signed letters of recommendation**, from non-family members.
4. Applicants must provide a 1000 word essay, which tells about the family member, whose work within the utility industry, qualified them for the scholarship and how that family member has inspired the applicant to continue their education.
5. Applicants **must provide signed proof** of community service/involvement activities.
  - Proof can be signatures from a non-family member adult from the organization, pictures, news articles concerning the event.
6. Completed Application Form and all supporting documentation should be mailed to the:  
  
KRUS  
c/o Ali Cotton  
PO Box 2900  
Hopkinsville, KY 42241-2900
7. Applications must be post marked by April 15<sup>th</sup>.

### Terms and Conditions:

- All applications will be reviewed; winners will be determined by the selection committee.
- Scholarships will be awarded on a one-time basis and will not be renewable. Previous applicants/recipients must re-apply to be considered for any future awards.
- Scholarships will be paid upon proof of registration of classes (fall semester class schedule) at an institute of higher education and will be issued in August. This check will be directly payable to the student.
- Scholarships will be awarded without regard to race, ethnicity, national origin, religion, gender or disability.

KRUS MEMORIAL SCHOLARSHIP  
APPLICATION REVIEW

Applicant Name: \_\_\_\_\_ Utility: \_\_\_\_\_

Name of Qualifying Electrical Utility Industry Employee: \_\_\_\_\_

To be eligible for scholarship, applicant must have completed the items listed below:

**ELIGIBILITY REQUIREMENTS:**

- \_\_\_\_\_ Signed and Completed Application
- \_\_\_\_\_ Qualifying Utility Industry Member
- \_\_\_\_\_ Prepared 1000 Word Essay
- \_\_\_\_\_ Two Signed Letters of Recommendation (non-family member),
- \_\_\_\_\_ Signed Proof of Community Involvement

**SCORING OF APPLCATION:** *(Maximum amount of points listed beside each category. Rate each area)*

- 1. Neatness and Quality of Application & Essay (33.3 Points) \_\_\_\_\_
- 2. Community Involvement (33.3) \_\_\_\_\_
- 3. Financial Need and/or Academics (33.3) \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reviewed By: \_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_  
\_\_\_\_\_