

Kansas Foster and Adoptive Children Scholarship Fund

- Purpose:** This fund was established to provide scholarships for any type of further education beyond high school including college, junior college, vocational, technical or other trade schools.
- Criteria:** In order to be eligible for the scholarship, you must meet the following:
- The students eligible for assistance shall be students who are or have been foster children in the State of Kansas, including foster children who have been adopted.
- Submit a scholarship application on a form provided by the Foundation.
- Guidelines:** Scholarships will be awarded June 1 and November 1 of each year.
- Type and Amount:** The type and amount of aid may include, but is not necessarily limited to tuition, room and board, books, etc. The scholarship awards will be paid directly to the school involved, and will be paid in two installments, one each semester.
- Deadline:** Applications are accepted year around; however, awards of scholarships will be made on June 1 and November 1 of each year.

Please submit applications to:

Scholarship Coordinator
Greater Kansas City Community Foundation
1055 Broadway, Suite 130
Kansas City, MO 64105

Kansas Foster and Adoptive Children Scholarship Fund Application

PERSONAL DATA

Name: _____
(Last) (Middle) (First)

Address: _____
(Street) (City) (State) (Zip)

Phone: _____ Date of Birth: _____

Social Security Number: _____ Male ____ Female ____

*Do you qualify for Kansas Foster Child Education Assistance Program? Y or N

*To qualify: You were in foster care at age 18, released from care before 18 but after high school graduation or receipt of a GED; or you were adopted or left foster care through guardianship after you turned 16.

Date of time spent in foster care: _____

Parents/GuardiansøNames: _____

Parents/GuardiansøAddress (if different from yours) _____

Your Marital Status: Single ____ Married ____ Divorced ____ Widowed ____

ACADEMIC DATA

Name of High School _____ Year of Graduation _____

Cumulative Grade Point Average: ____ Class Rank (if known) # ____ out of ____
(Please attach transcript)

NOTE: Scholarship awards do not depend on outstanding academic achievement, but the information is helpful.

Name of College or other school, if applicable _____
(If you are enrolled in college, please attach current transcript)

Name of Institution you will be attending: _____

Why do you want to attend this school? _____

What is your intended field of study? _____

What do you hope to do with your education? _____

How did you learn of the availability of this scholarship? _____

Have you received other scholarships or other financial aid? If so, please explain the nature and amount. _____

SCHOOL AND COMMUNITY INVOLVEMENT

List any organizations in which you have been a member or jobs in which you have been employed. Organizations may include academic, athletic, civic, religious or social groups. Jobs may also include volunteer work or internships.

Activity

No. of Years

Positions or Offices
Held

List any awards, honors or recognition received:

Which of the above experiences (participation in a particular activity, leadership position or honor received) has been most important to you?

Please submit any other statement or information you wish in support of your application:

Please provide names and telephone numbers of three references the committee could contact regarding the applicant's character, academic potential or community involvement (from individuals other than family members).

(Signature of Applicant)

(Signature of Parent/Guardian)

(Date)

Return completed application to:

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