

## The William Joseph "Bill" Adams Scholarship



Established 2014

Award Amount: \$5,000

Scholarship Application Form: Please print all information.

### I. Demographic Information about Student

A) Date of Birth \_\_\_\_\_

B) Name: First \_\_\_\_\_ Middle Initial \_\_\_\_\_ Last \_\_\_\_\_

C) Address: City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

D) Home Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_

E) Email address: \_\_\_\_\_

F) Township of residence (optional): \_\_\_\_\_

**II. Academic Information about Student**

**A) Applicant's Current High School:** \_\_\_\_\_

**B) Other High Schools Attended:** \_\_\_\_\_

**C) What is your current grade point average or letter grade average?** \_\_\_\_\_

**D) List all current courses you are taking in high school:**

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

6. \_\_\_\_\_

**E) List all AP and college courses you are taking:**

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

**F) What is your goal in taking the ground school course? Use a separate piece of paper with the following formatting requirements:**

**(i) 8.5" x 11.0 " sheet of paper**

**(ii) Times New Roman font, 12 pt.**

- (iii) One inch (1.0") margins
- (iv) Double space
- (v) Correct spelling and grammar
- (vi) Please limit your response to 300 words

**III. Historic Information about Student**

**A) Have you ever been convicted of a crime or been adjudicated a "delinquent child?"**

Yes: \_\_\_\_\_ No: \_\_\_\_\_

If "Yes," then attach a statement to this application explaining why your history should NOT be a factor in your eligibility for college or this scholarship.

Please limit your response to 300 words.

**B) List any school-related activities (e.g., sports, band, volunteer work, etc.) or community volunteer programs/activities (e.g., scouting, religious organizations, sports programs, etc.) in which you are currently involved or have been involved. If necessary, then you may attach another sheet of paper in order to list all activities.**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

**IV. Family Information**

**A) Father**

1. Name: \_\_\_\_\_
2. Self-employed? YES \_\_\_\_\_ NO \_\_\_\_\_
3. Occupation: \_\_\_\_\_
4. Employer (optional): \_\_\_\_\_
5. Net Income: \_\_\_\_\_

6. Father's Address (if different from applicant's): \_\_\_\_\_

7. Father's Phone Number (if different from applicant's): \_\_\_\_\_

**B) Mother**

1. Name: \_\_\_\_\_

2. Self-employed? YES \_\_\_\_\_ NO \_\_\_\_\_

3. Occupation: \_\_\_\_\_

4. Employer (optional): \_\_\_\_\_

5. Net Income: \_\_\_\_\_

6. Mother's Address (if different from applicant's): \_\_\_\_\_

7. Mother's Phone Number (if different from applicant's): \_\_\_\_\_

**C) Guardian**

1. Name: \_\_\_\_\_

2. Self-employed? YES \_\_\_\_\_ NO \_\_\_\_\_

3. Occupation: \_\_\_\_\_

4. Employer (optional): \_\_\_\_\_

5. Net Income: \_\_\_\_\_

6. Guardian's Address (if different from applicant's): \_\_\_\_\_

7. Guardian's Phone (if different from applicant's): \_\_\_\_\_

**D) Educational Background of Parent(s)/Guardian(s) (optional):**

High School: \_\_\_\_\_ College: \_\_\_\_\_

**E) Please list any other children living with you and/or your parents/guardian.**

Gender: \_\_\_\_\_ Age: \_\_\_\_\_

Gender: \_\_\_\_\_ Age: \_\_\_\_\_

Gender: \_\_\_\_\_ Age: \_\_\_\_\_

Gender: \_\_\_\_\_ Age: \_\_\_\_\_

Gender: \_\_\_\_\_ Age: \_\_\_\_\_

F) How many members of your family, including parents/guardian and siblings, plan to attend post-secondary school during the next school year? \_\_\_\_\_

V. Is there any additional information not contained in this application that you want the Scholarship Committee to consider? If so, then please use a separate sheet of paper for your response. Use a separate piece of paper with the following formatting requirements:

- (i) 8.5" x 11.0 "sheet of paper
- (ii) Times New Roman font, 12 pt.
- (iii) One-inch (1.0") margins
- (iv) Double space
- (v) Correct spelling and grammar
- (vi) Please limit your response to 300 words

VI. I hereby certify that the information given in the application is accurate and complete to the best of my knowledge. If I am accepted as a scholarship winner, I agree to abide by the policies, philosophy of conduct, and expectations of the scholarship committee and EAA Chapter 1354, Johnson County Aviators, Inc.

**IMPORTANT**

Misrepresentation in any of the statements in this application may be considered reason for repayment in full of the amount of the scholarship.

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

Student signature: \_\_\_\_\_

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

Parent/Guardian signature: \_\_\_\_\_