

## **Gruwell Scholarship Scholarship Award Guidelines**

- A. Choice of School: Accredited four-year college or university, or accredited two-year institution.
- B. Who May Apply: Residents of Lake Forest School District, Kent County, DE who have selected their college and have been accepted for admission as a full-time student.
- C. Considerations: Demonstrated financial need, community involvement, academic achievement and extracurricular activities.
- D. Nature of Award: \$1,000 for one academic year.
- E. How to Apply: Applications are available at Lake Forest high school guidance office. Completed applications must be submitted to the Lake Forest Guidance office no later than April 1st of the current school year, to be eligible for fall semester assistance. An application is complete, and considered for a scholarship award, only when the following have been submitted:
  - 1. A completed scholarship application
  - 2. Official high school transcript of grades
  - 3. Letter of acceptance from college or university
  - 4. A copy of parent/guardian and student's most recent income tax return
  - 5. Two letters of recommendation from non-family members (e.g. teacher, guidance counselor, employer, athletic coach, etc.)
  - 6. Applicant may be required to be interviewed by the Scholarship Committee

**GRUWELL SCHOLARSHIP APPLICATION**

**Student Name** \_\_\_\_\_  
Last First M.I.

**Permanent Address** \_\_\_\_\_  
Street

City State Zip  
**Telephone** ( ) **Social Security Number** \_\_\_\_\_

**How long have you been a resident of your County?** \_\_\_\_\_

**High School** \_\_\_\_\_ **Graduation Date** \_\_\_\_\_  
Month/Year

\_\_\_\_\_ ( ) \_\_\_\_\_  
Address Telephone

**College or University for which aid is requested** \_\_\_\_\_

\_\_\_\_\_ ( ) \_\_\_\_\_  
Address Telephone

**Entrance Date** \_\_\_\_\_

**List Extracurricular Activities, Work experience, Community service, Volunteer projects in which you have participated** (attach additional sheet if necessary):

I certify that I am a legal resident of \_\_\_\_\_ County, State of Delaware and that all information on this form is true and complete to the best of my knowledge.

\_\_\_\_\_  
Students Signature Date Parent's Signature Date

