

Fall 2009

BRIDGES TO THE FUTURE

(Scholarship Application)



Post Marked: May 10, 2009

Return by mail:

Coker Foundation, Inc
4132 S. Rainbow Blvd.
#487
Las Vegas, Nevada 89117
Attn: Gail Pell, J.D., Chair
Scholarships

THE COKER FOUNDATION, INC.

BRIDGES TO THE FUTURE

Scholarship Application Process

Eligibility Criteria: The applicants for the scholarship must:

- ❑ Be a United States citizen
- ❑ Demonstrate financial need
- ❑ Show achievement in academics by obtaining a minimum grade point average of 2.8 or higher
- ❑ Participate in community service
- ❑ Demonstrate leadership
- ❑ Be a graduating senior from a public, private, or parochial high school in Nevada
- ❑ Be accepted to an institution of higher learning for the next school calendar year, either a 4-year college or university, a community college, or trade school by time of the award date.

Funding for the Scholarship: The Coker Foundation, Inc. provides funds through an annual fundraiser, corporate, and individual contributions.

TO COMPLETE THE SCHOLARSHIP APPLICATION, PLEASE SUBMIT THE FOLLOWING:

- ❑ **The Coker Foundation, Inc. Application – *Section I***

- ❑ **Personal Profile & Statement of Financial Need- *Section II***

The enclosed document includes information about your family, educational history and financial needs. You will be asked to list your estimated college expenses for the next school calendar year, including tuition, books and supplies, performing special needs, and room and board.

- ❑ **Essay**

Write an essay and tell us about yourself in no more than 500 words. The essay should address what your long-term goals are for completing your education, how have you made and will you make a contribution in your community, and anything else you think may be important in helping us to understand who you are and how you see your future.

- ❑ **Transcripts**

Transcripts from any and all high schools attended should be sent directly by the school to The Coker Foundation.

THE COKER FOUNDATION,INC. APPLICATION

Section I

Please print with ballpoint pen or type.

Personal Information

Name: _____
 First Middle Last

Permanent Home Address: _____

City/State/Zip: _____

Phone: _____
 Day Evening

Birth Date: _____ Citizen of the United States of America Yes No

Place of Birth _____ Ethnic Origin: _____

Marital Status: Single Married Divorced Widowed

If married, give maiden name: _____

Current High School: _____

City _____ State _____

High School or High School Equivalency Yes No Date of graduation: ____/____/____

List the colleges/universities to which you have applied:

_____	Have you been accepted? <input type="checkbox"/> Yes <input type="checkbox"/> No
_____	Have you been accepted? <input type="checkbox"/> Yes <input type="checkbox"/> No
_____	Have you been accepted? <input type="checkbox"/> Yes <input type="checkbox"/> No
_____	Have you been accepted? <input type="checkbox"/> Yes <input type="checkbox"/> No
_____	Have you been accepted? <input type="checkbox"/> Yes <input type="checkbox"/> No

If accepted, the college/university I will attend is _____

What is your intended field of study and why? _____

Test Information

Have you taken the SAT? Yes No
Verbal Score _____ Math Score _____

Have you taken the ACT? Yes No ACT Score _____

WORK EXPERIENCE

Company/Organization	Dates	Supervisor Phone	Nature of Work
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LEADERSHIP ACTIVITIES

COMMUNITY INVOLVEMENT

AWARDS (academic, community, etc.)

Vérification

I affirm that the information included in Section I of my application is true and accurate in all respects. I also understand that the awarding of funds is contingent upon proof of my enrollment in an accredited institution, and that the funds will be used toward the cost of my education.

Signature of Student: _____ Date: _____

✎ Printed name of parent/guardian*: _____

✎ Signature of parent or guardian*: _____ Date _____

✎ Printed name of parent/guardian: _____

✎ Signature of parent or guardian: _____ Date _____

Release Statement (optional)

I authorize **The Coker Foundation** to use my name, records, photographs and/or likeness for any publicity purposes.

✎ Signature:* _____ Date _____

✎ Printed name of parent/guardian: * _____

✎ Signature of parent or guardian: * _____ Date _____

✎ Printed name of parent/guardian: _____

✎ Signature of parent or guardian: _____ Date _____

***REQUIRED**

THE COKER FOUNDATION, INC.

SCHOLARSHIP APPLICATION

Section II

PERSONAL PROFILE & STATEMENT OF FINANCIAL NEED

Please print with ballpoint pen or type.

School Information

Please check correct college admissions classification:

- Freshman Degree Early Admission
 Transfer Non-Degree Other (specify) _____

When do you plan to enroll?

- Fall Spring Summer
 Full-Time Part-Time Specify Year _____

Intended major: _____

Financial Information

Are you applying for financial assistance? Yes No

Have you submitted a Financial Aid Form (FAF) or Family Financial Statement (FFS)?

- Yes No

Residence Plans: Dormitory Off Campus

Estimated Sources of Funds for College Expenses

List anticipated earnings of student during summer and school year:

Have you been awarded any scholarships Yes No. If yes, please name the donor (s) and the amount(s)

Amount \$

Amount \$

Amount \$

Amount \$

Amount \$

Amount \$

Family Information

Father or Male Guardian (full name)

Mother or Female Guardian (full name)

Address (street and number)

Address (street and number)

City, State and Zip Code

City, State and Zip Code

Phone (area code and number)

Phone (area code and number)

Father's Occupation

Mother's Occupation

Father's Annual Salary

Mother's Annual Salary

Number of Other Family Members in College/Technical School

Family's out-of-pocket dollars for college expenses

Name of Family Member in College or Technical School

Name of College or Technical School

Name of Family Member in College or Technical School

Name of College or Technical School

Name of Family Member in College or Technical School

Name of College or Technical School

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Name of College or Technical School

Name of Family Member in College or Technical School

Name of College or Technical School

Expected contributions from parents, guardians, or other family members:

Anticipated College Expenses:

Tuition:

Books and Supplies:

Room and Board:

Other:

Other:

 Do you own a personal computer (PC)? Yes No

Please provide additional information you would like the Scholarship Committee to consider about your personal, academic or financial circumstances:

VERIFICATION:

I affirm that the information I have provided on the financial statement, Section II, above is true and accurate in all respects.

 Student-Applicant's Signature:* _____ Date_____

 Printed name of parent/guardian: * _____

 Signature of parent or guardian:* _____ Date_____

 Printed name of parent/guardian: _____

 Signature of parent or guardian: _____ Date_____

*** REQUIRED**

Make sure your application is complete and includes each of the following:

- ✓ Section I Completed and Signed by student and parent(s) or guardian(s)
- ✓ Section II Completed and Signed by student and parent(s) or guardian(s)
- ✓ Essay
- ✓ Official Transcripts