The Seattle Foundation Scholarship
♦ Up to $2,500 (renewable)♦

The purpose of The Seattle Foundation Scholarship is to assist low-income King County students in pursuing and completing degrees of higher education.

All types of students have the opportunity to receive this scholarship. “Non-traditional” students as well as traditional college students and High School Seniors are encouraged to apply.

Award Details
- One half of the total funds available will be awarded to students attending community colleges or vocational schools and one half will be awarded to university students
- 4 year college/university (undergraduates) - $2,500 renewable for up to 4 years totaling $10,000
- Community College/Vocational - $1,500 renewable for up to 2 years totaling $3,000.
- Multiple awards will be made

Eligibility Criteria
- King County resident
- Demonstrate financial need
- Show community involvement
- Academic achievement demonstrated by a minimum cumulative 2.5 GPA (high school or college, as applicable)
- Study at an accredited public community college, four year college/university, or trade/vocational school in Washington State

Timeline
- Deadline - Must be received by 5:00 p.m. on FRIDAY, MAY 8, 2009.
- Notifications will go out after Friday, May 15, 2009.
- Scholarship Celebration will be held Wednesday, May 20, 2009 (attendance optional).

Required Attachments (Please do not use staples and submit all of the information in one packet)
- Official transcript(s) — high school and/or college, as applicable
- Two letters of reference/recommendation (do not submit letters from relatives)
- Essay—Please write a short (500 maximum) essay describing how your community involvement and/or educational and career path has helped to build your community.

Incomplete applications or applications received after the deadline will not be considered.

Please mail or hand deliver your submittal to:
The Seattle Foundation Scholarship
1200 Fifth Avenue, Suite 1300
Seattle, WA  98101-3151

www.seattlefoundation.org/tsfscholarships
Applicant Information

SCHOLARSHIP PROGRAM(S) FOR WHICH YOU ARE APPLYING: __________________________

Last Name: ____________________ First: ____________________ Middle Initial: ____________________

Permanent Mailing Address:

City: ____________________ State: ____________________ Zip: ____________________

Telephone: (________) ____________________ E-mail Address: ____________________

Student ID # (if known): ____________________ Cumulative GPA: ____________________ Class Rank: ____________________

Date of Birth: / / __________ Male □ Female □ (Optional) Ethnic Origin: ____________________

U.S. Citizen Yes □ No □

School Information (complete applicable sections and check box of current school)

□ High School: ____________________ Graduation Date: / / __________

City: ____________________ State: ____________________ Zip: ____________________

□ College/University: ____________________ Graduation Date: / / __________

City: ____________________ State: ____________________ Zip: ____________________

□ Graduate School: ____________________ Graduation Date: / / __________

City: ____________________ State: ____________________ Zip: ____________________

WHAT COLLEGES/UNIVERSITIES DO YOU PLAN TO AND/OR HAVE YOU APPLIED? [LEAVE BLANK IF NOT APPLICABLE]

School Name: ____________________ Application Sent: Yes □ No □ Accepted: Yes □ No □ Unknown □

School Name: ____________________ Application Sent: Yes □ No □ Accepted: Yes □ No □ Unknown □

Verification

I affirm that the information included with my application is true and accurate in all respects and that I intend to pursue a degree in higher education. I understand that if selected, the awarding of funds is contingent upon my full-time enrollment in an accredited institution, and that the funds will be paid directly to the institution and used toward the cost of my education.

Signature: ____________________ Date: ____________________

Parents Signature (if under 18 years old): ____________________

Scholarship Application Form
www.seattlefoundation.org/scholarships

THIS SCHOLARSHIP IS NOT AVAILABLE TO RELATIVES OF THE SEATTLE FOUNDATION’S SCHOLARSHIP REVIEW COMMITTEES OR DONORS TO THE SCHOLARSHIP(S) FOR WHICH YOU ARE APPLYING.
Financial Information Form - CONFIDENTIAL

Applicant Name:

Please check one:  □ Father/Male Guardian  □ Mother/Female Guardian  □ Self (if independent)

Name:

Address:

Occupation:

Employer:

Home Phone: (          )

Work Phone: (          )

Please check one:  □ Mother/Female Guardian  □ Father/Male Guardian  □ Spouse

Name:

Address:

Occupation:

Employer:

Home Phone: (          )

Work Phone: (          )

Annual Income (before taxes/gross)

Father/Male Guardian ................................................................. $ 

Mother/Female Guardian .......................................................... $ 

Student (for informational purposes only; will not be factored into need)............ $ 

Spouse .......................................................... $ 

Other (please specify: child support, welfare, social security, etc.) ................. $ 

Total family income earned during most recent tax year ....................... $ 

Total family size: 

Number of dependents other than you currently attending college: 

Section continued on next page ...
Financial Information Form (continued)

Please write a statement of your financial need for assistance. Also address how you are contributing toward your education expenses for the coming college year through additional financial aid, employment or other income.
**Community service, extracurricular activities, prior awards or scholarships**

You may submit a resume in lieu of this page (TWO PAGES MAXIMUM).

List all school activities in which you have participated in during the past five years (e.g., student government, music, athletics, etc.). List all community activities in which you have participated without pay during the past five years (e.g., community volunteer). Note special awards, honors and offices held.

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<th>Activity</th>
<th>Length of Time Participated</th>
<th>Special Awards/Honors</th>
<th>Offices Held</th>
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**Paid and unpaid work experience**

Describe your work experience during the past five years or up to two of your most recent jobs (e.g., internships, office work, babysitting, etc.). Indicate dates of employment for each position and approximate number of hours worked each week.

Employer: Position:  
From (month/year) / to / Hours/Week: 

Employer: Position:  
From (month/year) / to / Hours/Week: 

Employer: Position:  
From (month/year) / to / Hours/Week: 

Employer: Position:  
From (month/year) / to / Hours/Week: 

Employer: Position:  
From (month/year) / to / Hours/Week: 

Applicant Name: