



## SCHOLARSHIP APPLICATION Occupational Training DEADLINE: *May Apply 1x per Calendar Year*

An applicant for a scholarship must be a beneficial member of 1891 Financial Life one full year by the application deadline. Certificates must be in force and active. Student may apply for only one scholarship or one grant per year.

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Current Home Address / Apt. No: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Primary Phone No: \_\_\_\_\_ Alternate Phone No: \_\_\_\_\_

DOB (MM/DD/YYYY): \_\_\_\_\_ Age: \_\_\_\_\_ Email: \_\_\_\_\_

Date of High School Graduation / GED: \_\_\_\_\_

**Court/Impact Team Information** Court/Impact Team Name and No: \_\_\_\_\_

Certificate Effective Date: \_\_\_\_\_ Certificate No: \_\_\_\_\_

### **School You Plan To Attend / Are Attending** - Name of Accredited College, University or Trade School

Name of School: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Planned Field of Study: \_\_\_\_\_

GPA: \_\_\_\_\_ Graduation Month / Year: \_\_\_\_\_

**Please have your current school send an official transcript.**

**ESSAY:** State in 250 words or less. Essay must be double-spaced and typed. Attach essay on a separate sheet of paper. List your activities: Include school activities, community involvement, volunteerism, academic honors, Court/Impact Team participation, and employment history. Explain why you wish to pursue your chosen field of study and how it will help you make a difference in others' lives?

### **OCCUPATIONAL TRAINING SCHOLARSHIP**

- High school seniors or adults pursuing a technical or vocational training program.
- Member can receive \$1000 in \$500 increments per year. Member needs to re-apply each year; years awarded do not need to be consecutive.

**Please include: most recent high school or college transcript, essay, one completed reference form.**

\_\_\_\_\_  
STUDENT'S SIGNATURE

\_\_\_\_\_  
DATE

1891 FINANCIAL LIFE RESERVES THE RIGHT  
TO CHANGE OR DISCONTINUE THESE PROGRAMS AT ANY TIME.



## SCHOLARSHIP APPLICATION

### Reference Form

Completed by a School Professor/Advisor or Professional Reference (Return to Student)

**DUE: May Apply 1x per Calendar Year**

PLEASE PRINT OR TYPE

Applicant's Full Name: \_\_\_\_\_

#### General Recommendation and Evaluation

1) Please type and attach your thoughts on the student's strengths and weaknesses in character, cooperation in working within a group, and leadership; include how you think they will make a difference in people's lives.

#### 2) Please rate applicant.

	Superior	Above Average	Average	Below Average	NA
a) Quality of work (accuracy, neatness):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Work habits (dependability, progress):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Proficiency (skill, initiative, adaptability):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) High standard of conduct, good reputation, dependable, loyal, punctual, positive attitude:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) Ability to assume responsibility and accept leadership:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) CHOOSE ALL THAT APPLY					
Service to school:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Service to church:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Service to community:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Service to 1891 Financial Life:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

\_\_\_\_\_  
REFERENCE'S NAME AND JOB TITLE

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
TIME ACQUAINTED WITH STUDENT

\_\_\_\_\_  
DATE

This information will be treated in a confidential and professional manner and will be viewed only by an independent judging committee. This report should be signed by the person making this evaluation.

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