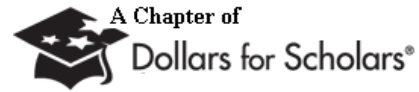


Colfax Schools Foundation



To the Applicant:

Please complete this application to determine your eligibility for 2007 scholarship funds. These awards have been set aside to help students who plan to attend postsecondary education and who satisfy criteria developed by Colfax Schools Foundation and Dollars for Scholars. Last year the Foundation was able to provide \$6000 in scholarships plus additional \$5000 in scholarships from Colfax Rotary, Les Schwab, Juanita Scholz Morasch, Edward and Sandie Doyle Harter, Duane and Lori Stueckle, and Maxine and Roland Watts Scholarships. The total amount this year was not available at the time of printing. Please check the school web site for updated information. It is recommended, but not required, to use this application from the school web site at www.colfax.k12.wa.us and is available by request in word format from marsha_binder@yahoo.com or michaelm@colfax.k12.wa.us.

The Colfax Schools Foundation was established to provide opportunities to help students in the Colfax School District be more successful. This opportunity is provided through the continuing generous donations from people who care about Colfax students. You can be a part of this opportunity by contributing to the Colfax Schools Foundation. Please consider this opportunity as you become successful in your career. For further information on how to contribute, contact Terry Eng or the Colfax School District office.

If you feel you need to attach a note explaining any section in this application, please refer to the question by section, include the clarification or explanation, and place your identification number at the top of the page.

You are responsible for seeing that all supporting documents are submitted. Dollars for Scholars and its affiliate programs reserve the right to process only applications found to be complete as of the application postmark deadline or turned in to the Colfax School District office on or before 4:00 PM, March 1, 2007.

REMEMBER this application becomes valid only when the following have been submitted:

1. Applicant data
2. School data
3. Other awards
4. Personal data
5. Transcript information
6. Applicant appraisals (three)
7. Financial assistance questionnaire
8. Personal essay

Certification:

In submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge. Falsification of information may result in termination of any scholarship granted.

By submitting this application, I am giving permission to the Colfax Schools Foundation to use my name for publicity and announcement of scholarship recipients.

Use of this scholarship may be deferred for up to one year due to employment, armed services, missionary commitment, illness or other reasons agreed upon by the foundation.

Applicant's Signature: _____ Date: _____

Parent Signature (if under age 18): _____ Date: _____

ID #

PLEASE PRINT OR TYPE

APPLICATION DATA

Name (Last) (First) (Middle initial) Social Security number

Permanent address (street) (city) (state) (zip)

Date of birth (month, day, year) Telephone Number E-mail address

Name of parent/guardian

Permanent mailing address of parent/guardian if different from applicant Telephone number

SCHOOL DATA

High schools attended: _____ City: _____

_____ City: _____

Name postsecondary school for which applicant's scholarship is requested:

- _____
- 4-yr. Public College/University
 - Community College
 - Vo-Tech School/Certification
 - Private University

Address: _____
(street) (city) (state) (zip)

Major field of study: _____

OTHER AWARDS

Please list the name and amount of any grants or scholarships that you have been awarded for the coming school year. Indicate those which are contingent upon attending a particular school.

Name of award	Amount	Granted	Contingent

ID #

TRANSCRIPT INFORMATION

Please have the following completed by the principal or counselor of the high school.

Cumulative grade point average: _____/4.0 scale

PSAT: Verbal _____ Math _____ Critical Reading _____ Writing _____

SAT: Verbal _____ Math _____ Critical Reading _____ Writing _____

ACT: English _____ Math _____ Reading _____ Science _____ Comp _____

WASL: Place an X before each content area in which you met the state standard in the WASL test

_____Science _____Reading _____Writing _____Math

Principal or Counselor signature Date Telephone Number

(509) 397-4368

OTHER INFORMATION

In the space provided, please describe any unusual family or personal circumstances that have affected your achievement in school, work experience, or your participation in school and community activities.

EDUCATION AND CAREER PLAN

In 100 words or less, provide a statement of your plans as they relate to your educational and career objectives and future goals. Include an achievement of these goals such as I plan to attend WSU for a BA in Education with a minor in math and become a math teacher in Eastern Washington.

ID #

PERSONAL ESSAY

In the space provided, compose a one page typed, double spaced, 12 pt. font (250 words minimum) personal essay on one of the following topics. This essay must be grammatically correct with complete sentences and proper punctuation. Only the first page will be considered for scoring purposes.

1. Indicate a person or event that has had a significant influence on you and describe that influence.
2. Describe a book, work of art, or music piece that left an impression on you and evaluate its effect.

ID #

APPLICANT APPRAISAL

Student:

To be completed by a high school staff member and any two of the following: current employer, volunteer coordinator, supervisor, school staff member, member of the clergy, or any other person who is in a position to evaluate you according to the criteria given. Do not include a family member appraisal. Place your ID # in the box on the form, provide an envelope with your application number clearly written on the front, and ask the person who will be evaluating you if they would be willing recommend you for the Colfax Schools Foundation Scholarship.

Evaluator:

You have been asked to provide information in support of this applicant for a scholarship from the Colfax Schools Foundation in conjunction with Dollars for Scholars. Please give immediate and serious attention to the following statements and provide comments that support your evaluation of the candidate. When complete, please seal in the envelope provided and return to the applicant or District Office on or before March 1. Thank you for your careful consideration of this applicant.

	Extremely appropriate	Very appropriate	Moderately appropriate	Not appropriate
The applicant's choice of a postsecondary education program is				
	Extremely well	Very well	Moderately well	Not well
The applicant's achievements reflect his/her ability.				
The applicant is able to seek, find, and use learning resources.				
The applicant demonstrates curiosity and initiative.				
The applicant demonstrates good problem-solving skills, follows through and completes tasks.				
	Excellent	Good	Fair	Poor
The applicant's ability to set realistic and attainable goals is				
The quality of the applicant's commitment to the school and community is				
The applicant's respect for self and others is				

Please include comments to support your rating. Do not use the applicant's name.

Appraiser's Name

Signature

Title

Date

INSTRUCTIONS FOR COMPLETING THE FINANCIAL AID QUESTIONNAIRE

Applicant ID number is to be placed in the box on the top left hand corner of questionnaire.

1. **Adjusted Gross Income** can be found on the IRS FORM 1040 and is gross income reduced by specific deductions allowed by law.
2. **Total Federal Tax Paid** includes the total amount of federal income taxes paid as reported on IRS FORM 1040. This is not the amount withheld from employee paychecks. (The amount withheld should be adjusted by any refund or additional taxes due.) Do not report state income tax.
3. **Total Income Earned** should be reported individually for both parents. If the student resides with only one parent, CSFA prefers to receive financial information from both natural parents, when possible. Financial information must be received from the parent who claims the child as a dependent for tax purposes. If a parent has remarried, the spouse's information is required if the spouse is a legal guardian of the student, or claims the student as a dependent, or the student is included in the spouse's benefit plan. If necessary, two Financial Data sections may be submitted by the student. A copy of the Financial Data section may be made in order for one to be completed by each parent.
4. **Untaxed Income and Benefits** include any other income or benefits not included in the adjusted gross income figure. Do not include untaxed contributions to retirement plans.
5. **Medical and Dental Expenses** include only those expenses not paid by insurance. Do not include premiums paid.
6. **Total cash, checking, savings, cash value of stocks, etc.** include liquid assets that can be used for educational expenses. Not included are IRA's, 401(k), or other retirement plan funds.
7. **Total number of family members** living in the household and primarily supported by the above income includes dependent college students living away from home.

Additional information

Be sure to check the appropriate line giving the current marital status of the person whose financial information is submitted.

Include the total number of all family members attending postsecondary school at least half time. Be sure to include the applicant in the number.

Certification and signatures: This form should be signed by both the student and the parent completing the financial aid questionnaire. Parent signatures are not required for an independent student as related to the IRS tax reporting.

NOTE: Any exceptions to providing financial information as instructed above must be submitted to the Colfax Schools Foundation.