DOOLITTLE BUSINESS SCHOLARSHIP APPLICATION

Eligibility

Financial need and/or high academic achievement shall not be mandatory criteria for a recipient to be granted a scholarship. Scholarships are limited only to graduates who attended Aberdeen Central High School for at least two years. Scholarships are also limited to sophomore, junior, or senior year expenses of students attending a four year accredited university or college who have demonstrated leadership skills, civic or community involvement, and a sincere concern for others. Although preference is to be given to applicants majoring in Business, other major courses of study may also be considered. Candidates may be awarded the scholarship multiple years, and must apply every year.

No candidate shall be denied being recipient of a scholarship on the basis of race, creed, sex, religion, national origin, or any other basis which is prohibited by Section 501 (C) (3) of The Internal Revenue Code.

Application Procedure

Applications are available online at https://aberdeen.k12.sd.us/foundation/scholarships.html, or may be picked up at the Aberdeen Public Schools Foundation Office or in the Student Services area at Aberdeen Central High School. If you would like an application emailed to you, please contact Gretchen.Sharp@k12.sd.us.

Completed applications should be returned to the following address by the application deadline . . .

Doolittle Business Scholarship
Aberdeen Public Schools Foundation
1224 3rd Street South
Aberdeen, SD 57401
Or
Gretchen.Sharp@k12.sd.us

PLEASE NOTE: A Completed Application includes:

- Doolittle Business Scholarship Application - Part I
- Doolittle Business Scholarship Application - Part II
- Doolittle Business Scholarship Application - Part III
- Doolittle Business Scholarship Application – Part IV
- High School Transcript
- College Transcript
- 3 Letters of Recommendation (at least 2 of the 3 should be from individuals not related to the applicant)

Application Deadlines

Application plus the 3 Letters of Recommendation must be postmarked no later than May 1 or hand delivered to the Aberdeen Public Schools Foundation Office at 1224 3rd Street South, no later than 4 p.m. on May 1. Applications received after this date will not be considered. Scholarship recipients will be notified by June 15.
DOOLITTLE BUSINESS SCHOLARSHIP APPLICATION

PART I

1. Name in full

2. Address (street or box)
   (city, state, zip code)

3. Social Security # or Student ID#

4. PhoneNumber

5. Email address:

6. Parents'/Guardians' name:
   Address (street or box)
   (city, state, zip code)

7. Number of years attended Aberdeen Central High School
   Year of graduation from Aberdeen Central High School

8. Current College Status: Fr / Soph / Jr / Sr / not enrolled
   At:

9. College or University you plan to attend this fall:
   Address:
   Phone Number of Financial Aid Office:

10. Estimated expenses for scholarship application year -- attach documentation:

11. Major ______________ Minor ______________

11. Attach High School transcript and transcript of college courses completed.
DOOLITTLE BUSINESS SCHOLARSHIP APPLICATION

PART II

Provide evidence of your leadership skills, community involvement, and concern for others supporting your application:

School Activities
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Community Activities
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Employment
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Life Experiences
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
DOOLITTLE BUSINESS SCHOLARSHIP APPLICATION

PART III

Please comment on your plans for financing your college or university education including your efforts to obtain financial aid and the results thereof.

I hereby submit my Doolittle Business Scholarship application Part I, II, III, to be considered together with information provided by references. I authorize the scholarship committee to make appropriate inquiry, to verify the authenticity and accuracy of any and all information I or my references have provided.

Dated________________________ Signature________________________
Doolittle Business Scholarship Application

Part IV - Financial Information

Applicant’s Name: ____________________________________________________________

Parents'/Guardians' Name(s): __________________________________________________

I/We have completed the Application for Federal Student Aid.  ____Yes  ____No

Parents'/Guardians' most recent Adjusted Gross Income (Line 37 - Form 1040):
(includes salary, wages, dividends, interest, business profits, and any other taxable income)

<table>
<thead>
<tr>
<th>Income Range</th>
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<tbody>
<tr>
<td>$0 - 25,000</td>
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<td>$25,000 - 50,000</td>
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<td>$50,000 - 75,000</td>
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<tr>
<td>$75,000 - 100,000</td>
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<tr>
<td>$100,000 - 125,000</td>
</tr>
<tr>
<td>$125,000 - 175,000</td>
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<tr>
<td>$175,000 &amp; above</td>
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</tbody>
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Parents'/Guardians' most recent Asset Information (Per Section 3 - Application for Federal Student Aid):
Includes cash, savings, checking and savings accounts, real estate and investments (not home) less real estate or investment debt (not home), business value less debt, and investment farm value less debt (not family farm).

<table>
<thead>
<tr>
<th>Asset Range</th>
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<tbody>
<tr>
<td>$0 - 50,000</td>
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<td>$50,000 - 75,000</td>
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<td>$75,000 - 100,000</td>
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<td>$300,000 - 400,000</td>
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<td>$400,000 - 500,000</td>
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<td>$500,000 &amp; above</td>
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</tbody>
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Parents'/Guardians' most recent Filing Status 

_______Married filing joint return
_______Head of Household
_______Qualifying widow with dependent child

Applicant’s immediate household consists of (x):

_______Father
_______Mother
_______Brothers (____ #)
_______Sisters (____ #)
_______Others (list)

Number of family members attending college this fall: ________________________

Please list all scholarships and amounts received to date ________________________

________________________________________________________________________

________________________________________________________________________

Please note any other pertinent information that may reflect need for financial assistance to provide for college expenses of applicant: ____________________________________________________________

________________________________________________________________________

________________________________________________________________________

THIS INFORMATION WILL BE HELD IN STRICTEST CONFIDENCE BY THE ABERDEEN PUBLIC SCHOOLS FOUNDATION, BUT IS NECESSARY TO ASSURE THAT SCHOLARSHIP RECIPIENTS MEET THE FINANCIAL NEED CRITERIA.

_________________________________________  _____________________________
(Signature of Parent/Guardian)  (Date)

_________________________________________  _____________________________
(Signature of Parent/Guardian)  (Date)
DOOLITTLE BUSINESS SCHOLARSHIP APPLICATION

LETTER OF RECOMMENDATION

Name of Applicant_____________________

The person named above is applying for the Doolittle Business Scholarship. A description of the characteristics and abilities of this applicant would provide supplementary information to the Scholarship Committee.

Please briefly explain, how long and in what capacity have you known the applicant?

________________________________________________________________________

PLEASE INDICATE BELOW, ON A SEPARATE SHEET OF PAPER OR ON THE REVERSE OF THIS FORM, WHY YOU WOULD RECOMMEND THIS PERSON TO BE A DESERVING RECIPIENT OF THE DOOLITTLE SCHOLARSHIP

________________________________________________________________________

________________________________________________________________________

Signature:_____________________________________

I can be reached at: phone __________________________ email __________________________