



# Chippewa County Community Foundation

## **John C. Frybarger Memorial Scholarship**

Who can apply:

Gay, Lesbian, LGBTQ graduate from a high school in Chippewa, Mackinaw or Luce County.

Criteria:

- Student must have a C or high GPA
- Written narrative, reference sheet, and list of awards/honors

### Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_  
*City State ZIP Code*

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### High School Education

High School: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

Test Score: ACT \_\_\_\_\_ SAT \_\_\_\_\_

### Higher Education Information

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

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

Will you be a full-time student: \_\_\_\_\_ Will you be attending a full academic year: \_\_\_\_\_

If no for either question, please explain: \_\_\_\_\_

Degree you will be pursuing: \_\_\_\_\_ Major: \_\_\_\_\_ Minor: \_\_\_\_\_

Completed application and all required attachments must be turned into the Chippewa County Community Foundation by the **April 15th deadline**. Mail to: CCCF, PO Box 1979, SSM, MI 49783 (2nd floor of Huntington Bank – Suite 202). 906-635-1046 Email: [cccf@lighthouse.net](mailto:cccf@lighthouse.net) [www.chippewacountycommunityfoundation.org](http://www.chippewacountycommunityfoundation.org)

## **SCHOLARSHIP APPLICANT REQUIREMENTS:**

- Applicant must have a GED and/or graduated from a high school in Chippewa, Mackinaw or Luce County.
- Financial need may be considered. Financial need will be determined by the information provided on the attached Financial Information Form.
- Student must have a C or higher GPA.
- Preference will be given to a LGBTQ student that is pursuing a career in the Culinary Trades, Dietitian/Nutrition, Journalism, Literature or attending a vocational or trade school. In the event there is not a gay, lesbian, bi-sexual or transgender student, the scholarship may be given to a student that is pursuing one of the aforementioned areas of study.

## **REQUIRED ATTACHMENTS TO APPLICATION**

1. Financial Information Form (College will mail directly to the Chippewa County Community Foundation)
2. High school transcript listing all classes taken and grades received 9<sup>th</sup> through 12<sup>th</sup> grade.
3. ACT Score: Individual English, Mathematics, Reading, Science plus Composite. SAT scores are an acceptable alternative.
4. Written narrative that includes:
  - a. An essay explaining your desired career choice and future plans.
  - b. A list of extracurricular activities - school, community, sports and home related
  - c. List of volunteer and/or community service activities
  - d. List of your work experience
  - e. A statement why you should be granted this scholarship
5. Three written references from non-relative individuals. (Please do not include more than one reference from your school). References should include a contact phone number and/or email address.
6. List of awards/honors received.

## **The scholarship will be paid out based on the student's degree:**

### Bachelor's Degree

First year	– 20%
Second year	– 25%
Third year	– 25%
Fourth year	– 30%

### Associate's Degree

First year	– 50%
Second year	– 50%

### Certificate

First year	– 100%
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# FINANCIAL INFORMATION FORM



**Financial Information Form** (please read instructions carefully): *Student*, complete the top section and submit this Financial Information Form to the Financial Aid Office of your first-choice academic institution. Ask them to complete the form and **return to the Chippewa County Community Foundation no later than April 15<sup>th</sup>**. Be sure to allow the Financial Aid Office at least three weeks to process. It is your responsibility to follow-up with the Financial Aid office to ensure the form is received on time.

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Student # or Last 4 digits of your Social Security #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

**Authorization to Release Information:**

I authorize (name of college/university): [ \_\_\_\_\_ ] to provide the information requested below to the Chippewa County Community Foundation for scholarship consideration:

Student Signature: _____	Date: _____
Parent's (or Guardian) Signature: _____	Date: _____

**\*\*STUDENT STOP HERE – Send this form to your college Financial Aid Office\*\***

**Information below must be completed by a College Financial Aid Officer**

**To the Financial Aid Officer:** The above-named student is applying for at least one Chippewa County Community Foundation Scholarship. Please complete the following information and return to the Foundation by April 15<sup>th</sup>.

Applicant is considered: <input type="checkbox"/> Independent	Applicant is considered: <input type="checkbox"/> Dependent
Applicant's Adjusted Gross Income \$:	Parent(s)' Adjusted Gross Income \$:
Total dependents other than spouse:	Total size of parent(s)' household:

The information presented below is based on:  Current Year FAFSA       Previous Year's FAFSA

Cost of Attendance: \$
Scholarships: \$ (Institutional, athletic & outside scholarships)
Grants: \$ (pell, SEOG, institutional, etc.)
Other Sources: \$ (TIP, Native American Tuition Waiver, Veteran's benefits, etc.)

Will receiving a scholarship from the Chippewa County Community Foundation reduce the student's need-based aid:  Yes  No

If so, how?

Name of person completing form: _____	Title: _____
College/University: _____	Address: _____

Mail or email to the Chippewa County Community Foundation by **April 15<sup>th</sup>**. PO Box 1979, Sault Ste. Marie, MI 49783  
 EMAIL: [cccf@lighthouse.net](mailto:cccf@lighthouse.net) 906-635-1046