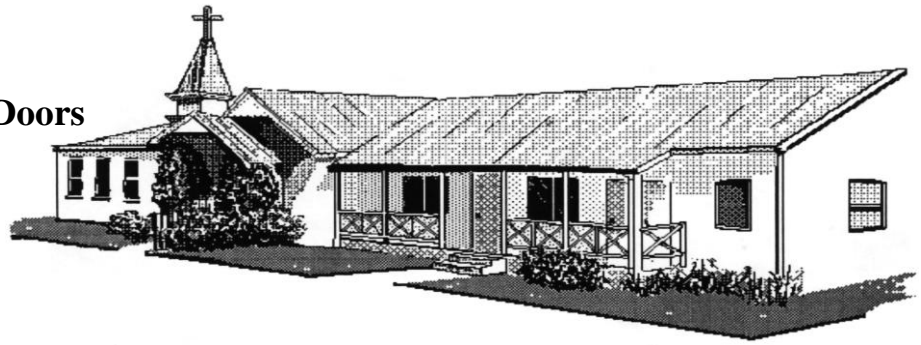


 **Paul Community Church**
Open Hearts, Open Minds, Open Doors

127 W. Clark / P. O. Box 35
Paul, Idaho 83347-0035
(208) 438-5530



jeffklamm@gmail.com

February 2022

Dear Applicant:

Thank you for your interest in the Ashley Dawn Haskin Scholarship. The Ashley Dawn Haskin Scholarship is made available through the courageous battle Ashley Dawn Haskin had with cancer. She passed away at age 7. An endowment fund was established in 1993 for the purpose of awarding scholarships each year beginning in 2003, the year Ashley would have graduated.

A Selection Committee has been established for the purpose of determining how many scholarships will be awarded in any given year, how much is to be given, and who will be recipients. This year, 2022, six scholarships will be awarded in the amount of **\$2000.00** each.

To be considered for a scholarship, the candidate must completely fill out the attached application form. The scholarship shall be used for full-time undergraduate study and can be used at any American college, university, trade, or vocational school approved by the Selection Committee.

The primary selection criteria shall be on the overall evaluation of application. The recipient must be in good standing academically with a minimum grade point average of 2.75, and must be deserving of a scholarship. The scholarship may be renewed for subsequent years if the recipient reapplies and remains otherwise eligible.

Applications for the scholarship **must be post marked by, Friday, April 8, 2022**. The decision on who will receive the scholarships will be made no later than **May 17, 2022**. Recipients will be notified by May 18th, 2022 **(The actual scholarship award will be sent directly to the institution after the recipient has provided proof of enrollment. Proof must be received by October 15, 2021 or scholarship will be forfeited.)** The application is to be mailed to the Paul Community Church • P.O. Box 35 • Paul, Idaho 83347.

Because of the circumstance for the Ashley Dawn Haskin Scholarship, included in the application, the candidate is asked to explain in 500 words or less, "What experience have you had with cancer in the life of a loved one, friend, or your own life? How did it affect you?"

If you would like an application emailed to you, contact Judy Brown at: jabrown256@gmail.com or Jeff Klamm at jeffklamm@gmail.com. Questions about the scholarship, the application or other concerns should be directed to the Selection Committee at (208)431-3713 or (208) 431-8948.

Grace and Blessings in Christ Jesus,

The Selection Committee

We are a church family called by God to proclaim the love of Jesus Christ to all who seek and believe.

**THE ASHLEY DAWN HASKIN SCHOLARSHIP FUND
APPLICATION FORM**

1. **Incomplete applications will be disqualified.**
2. The amount and number of scholarships awarded each year will be determined by the Selection Committee
3. Application **must be post marked by**, Friday, **April 8, 2022** (no exceptions).
4. The decision on who will receive the scholarship(s) will be made no later than May 17, 2022.
5. Application must be printed on a computer to be complete, **no handwritten application allowed.** (If you would like an application emailed to you contact: Judy Brown at: jabrown256@gmail.com or Jeff Klamm at: jeffklamm@gmail.com).
6. Application is to be mailed to the Paul Community Church • P.O. Box 35 • Paul Idaho 83347
7. Questions regarding applications call: 208-431-3713 or 208-431-8948.
8. If you are awarded a scholarship and drop out during the semester, the unused portion of funds must be returned back to the Ashley Dawn Haskin Endowment Fund.
9. The information contained herein is confidential.
10. **Attach additional pages as needed for answering questions.**

Name: _____

Address: _____

Telephone Number: _____

Describe in detail your educational goals including your college major _____

Describe in detail your career goals _____

List your school activities _____

List your church and community activities _____

Work experience _____

Please list any other scholarship and/or grants for which you have applied (Please indicate any that you have received) _____

List awards and/or honors you have received _____

Name and address of the college or university you plan to attend.

What are your hobbies or interests? _____

Why do you think the Selection Committee should award you this scholarship? (*Explain in detail*)

What experience have you had with cancer in the life of a loved one, friend, or your own life? How did it affect you? (Maximum 500 words).

Please list three (3) references (not including relatives) who know you and your abilities.

1. Name _____ Address _____
Phone number _____ - _____

2. Name _____ Address _____
Phone number _____ - _____

3. Name _____ Address _____
Phone number _____ - _____

INCLUDE a letter of reference from a NON-family member and NOT from one of the three references listed above.

INCLUDE OFFICIAL *FULL* High School transcript or minimum 2 year college transcript of institutions you have attended (including high school, college, vocational school, etc.) Any questions, call to clarify.

EXPENSES & INCOME FOR UPCOMING YEAR FOR EDUCATION

EXPENSES:

Tuition & fees = \$ _____

Books, materials and equipment = \$ _____

Room = \$ _____

Board = \$ _____

RESOURCES

Personal Checking & Savings = \$ _____

Anticipated Earnings this summer = \$ _____

Aid from parents and or individuals = \$ _____

Other scholarships & Grants = \$ _____

Financial resources
(Private or Personal) = \$ _____

TOTAL ESTIMATED EXPENSES:

\$ _____

TOTAL ESTIMATED RESOURCES:

\$ _____

NOTE: These expenses and income pertain to a full year of school.

Any comments you would like to add for the Section Committee's consideration?

By signing this application, you verify that you understand its requirements and that all information provided is true and correct to the best of your knowledge.

DATE: _____ **SIGNATURE OF APPLICANT:** _____