

KAFCS Scholarships

The Kentucky Association of Family and Consumer Sciences will award one or more scholarships to deserving college students for the upcoming academic year. Scholarships range in value from \$500 to \$750. A recipient may receive a scholarship for a second year. To be eligible for scholarships, a student:

1. will have achieved junior, senior or graduate student status at the time the scholarship is used,
2. will use the scholarship in a Kentucky college or university,
3. will major in a field of Family and Consumer Sciences,
4. will maintain membership in the American Association of Family and Consumer Sciences for the duration of the scholarship

KAFCS SCHOLARSHIP APPLICATION FORM

Scholarship applications must be postmarked no later than **February 1, 2010**.

Late applications will not be considered. Send your completed application, sealed letters of recommendation and official transcript(s) to:

Marianne Lorensen
KAFCS Executive Secretary
P.O. Box 632
Lexington, KY 40588

Phone: 859-492-9437; Email: melorensen@uky.edu

Name: _____
Campus Address: _____
Phone: (_____) _____ Email: _____
Permanent Address: _____
Phone: (_____) _____ Cell Phone (optional) _____
AAFCS membership number _____ Membership Renewal
Date _____
Are you a former KAFCS scholarship winner? _____

What Kentucky college or university do you currently attend? _____

What Kentucky college or university do you plan to attend this coming fall?

Hours completed as of January, 2010 _____

Hours expected by May, 2010 _____
(Note: Junior status=60 hours; senior status=90hours)

When do you plan to graduate? _____

What is your major? _____

What colleges or universities have you attended prior to the one in which you are currently enrolled?

Institution/ Years Attended

List the name and contact numbers of your KAFCS Student Advisor or a faculty member you have asked to write a letter of recommendation.

Name: _____
Address: _____
Phone: _____ Fax: _____ Email: _____

List the name and contact numbers of another college or university faculty member you have asked to write a letter of recommendation:

Name: _____
Address: _____
Phone: _____ Fax: _____ Email: _____

List and describe the responsibilities you have assumed in family and consumer sciences activities and other college activities. Attach additional sheets as necessary.

A. AAFCS/ KAFCS:

B. Other family and consumer sciences activities:

C. Other college activities:

D. Civic, community, and/or employment roles

Describe your short- and long-term career goals:

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Review and sign the following obligations of a scholarship winner:

I will recognize that if I receive a KAFCS scholarship, I accept the following responsibilities:

- a. By August 1 inform the KAFCS President of my specific plans to attend college or of any changes to my plans that will affect my scholarship.
- b. Notify the KAFCS Treasurer immediately upon receipt of the scholarship checks. (One half of the scholarship will be sent to the chair of the FCS department/unit in August and the second half in January.)

In addition, I certify to the best of my knowledge that all of the information provided in this application form is true and I am prepared to document this information if requested. I understand that noncompliance to the criteria may result in forfeiting a scholarship.

Applicant's Signature / Date

ATTACHMENTS: 1. Two letters of recommendation in sealed envelopes. 2. Official transcript from each college or university attended.