



**COMMUNITY  
FOUNDATION**  
*of Southwest Kansas*



*Scholarship Application*  
**2025/2026**



# COMMUNITY FOUNDATION *of Southwest Kansas*

## SCHOLARSHIP APPLICATION ACADEMIC YEAR 2025-2026

### Application Procedure

#### Eligibility

Students, both traditional and non-traditional, planning to enroll in post secondary education for the 2025-2026 academic year. Each semester full-time, undergraduate students must be enrolled in at least 12 credit hours per semester; at an accredited institution.

#### Instructions for Application

Instructions for Application

1. All applicants must attach an OFFICIAL academic transcript to their applications (for in-coming freshman, your high school counselor must fill out the "High School Academic Verification" section.) The application must be signed on the appropriate line by your high school counselor.
2. Attach one small picture to the application.
3. Attach (2) CURRENT letters of recommendation.
4. Attach your personal essay.
5. Attach resumé of activities, honors and work experience.

6. Complete all sections required on the scholarship application and enclose any additional required materials requested under one cover. Please submit as a loose leaf document., i.e. no binders, folders or staples. To assure this office receives the entire application, we ask you do not email or fax the document. Submit the application to: Community Foundation of Southwest Kansas, Scholarship Committee, P.O. Box 1313, Dodge City, KS 67801-1313.

#### Deadline

Application deadline is February 3, 2025. You are encouraged to apply as early as possible. Applications received after the deadline will not be considered.

#### Selection Process

Notification will be sent to applicants receiving awards as soon as the scholarship committee has met and reviewed all applications, on or before May 1, 2025.

### Section A: General Information

Student Name: \_\_\_\_\_  
First Middle Last

Birth Date: \_\_\_\_\_ Email: \_\_\_\_\_

Parent(s) Name/Spouse: \_\_\_\_\_  
(include maiden name)

Occupation of Parent(s): \_\_\_\_\_

Permanent Mailing Address: \_\_\_\_\_  
Number Street Apt.

\_\_\_\_\_ City County State Zip

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Number of family members in college in 2025-2026 (including self)? \_\_\_\_\_

Academic Classification for the Fall (August) 2025 Semester:

Freshman     Sophomore     Junior     Senior

Name and address of Accredited Educational Institution in which enrollment is planned:

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Major or expected major: \_\_\_\_\_ Degree Sought:  Associate  Bachelor

Secondary or minor area(s) of study: \_\_\_\_\_ Expected date of degree completion: \_\_\_\_\_  
Year

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## Section B: High School Information

(complete if in-coming freshman, first-time applicant or if previously denied and reapplying)

Name of High School attending or graduated from: \_\_\_\_\_

High School Address: \_\_\_\_\_  
Street City State Zip

Expected date of high school graduation: \_\_\_\_\_  
Month Year

Did you complete the Kansas Scholars Curriculum? \_\_\_\_\_

## High School Academic Verification

(This section to be completed by your High School Counselor or Principal.)

Graduating Class: \_\_\_\_\_ Number of Graduates: \_\_\_\_\_

Class Rank: \_\_\_\_\_ ACT or SAT composite: \_\_\_\_\_

Cumulative grade point average in hundredths (A—4.00, B—3.00, C—2.00, D—1.00): \_\_\_\_\_

\_\_\_\_\_  
Signature of high school official

\_\_\_\_\_  
Title

\_\_\_\_\_  
Name of School

\_\_\_\_\_  
Date

**\*Please attach, to this application, an official high school transcript and dual credit high school/college transcript if applicable. (Application will not be processed without transcript.)**

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### Section C: College Information

(complete if continuing, returning or transferring student or high school student with completed college credits)

#### Collegiate Academic Verification

Continuing, returning or transferring students or high school students with completed college credits, must provide academic verification.

**\*Please attach a copy of your current official college transcript to this application.  
(Application will not be processed without an official transcript.)**

My current cumulative GPA is: \_\_\_\_\_ GPA within Major: \_\_\_\_\_



*Our organization respects and understands the importance of your privacy and the sensitivity of your personal information. The information requested is strictly for the use of identifying eligibility for Community Foundation of Southwest Kansas scholarships and will be kept confidential.*

### Section D: Financial Information

(This is required if you wish for financial need to be a consideration.)

Estimated Annual College Expenses:

Tuition & Fees: \$ \_\_\_\_\_

Books & Supplies: \$ \_\_\_\_\_

Room & Board: \$ \_\_\_\_\_

Estimated Annual College Expenses:

Personal Savings: \$ \_\_\_\_\_

Aid from Parents: \$ \_\_\_\_\_

Loans: \$ \_\_\_\_\_

Grants: \$ \_\_\_\_\_

Known Scholarships  
for Academic Year  
2025-2026 \$ \_\_\_\_\_

Parents' total adjusted gross income: \$ \_\_\_\_\_

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### Section E: Saint Mary of the Plains Scholarship

(The information below pertains to any **relatives** of the applicant who have a relationship with **Saint Mary of the Plains**.)

Name & Year Graduated: \_\_\_\_\_

Academy, High School, or College? \_\_\_\_\_

Explain family relationship to SMP Alumni: \_\_\_\_\_

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### Section F: Specific Scholarships

Mark all that apply:

- Graduate of Sacred Heart School, Ness City
  - Member of Cathedral of Our Lady of Guadalupe Parish in Dodge City
  - Member of 4th Degree Knights of Columbus
  - Relative of a current or retired Crop Quest employee
  - Participant in Dodge City High School golf
  - Softball player in high school planning to play softball in college
  - Member of 4H
  - Athletic Trainer at Dodge City High School
  - If you are an athlete which sport do you play? \_\_\_\_\_ Number of years? \_\_\_\_\_  
at Dodge City High School.
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### Section G: Personal Essay

In 300 to 350 words, typed and double-spaced (on separate sheets), include a personal essay telling us about yourself. Please include your career objectives and why you're in need of scholarship assistance.

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## Section H: Application Checklist

**Incomplete applications will not be processed.**

In support of this application, I have completed and enclosed:

- |   |  |
|---|--|
| <input type="checkbox"/> Section A                | <input type="checkbox"/> Section F   |
| <input type="checkbox"/> Section B                | <input type="checkbox"/> Section G   |
| <input type="checkbox"/> Section C                | <input type="checkbox"/> Official copy of academic transcripts             |
| <input type="checkbox"/> Section D, if applicable | <input type="checkbox"/> <b>Two (2) CURRENT letters of recommendation</b>  |
| <input type="checkbox"/> Section E                | <input type="checkbox"/> Resumé of activities, honors, and work experience |

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Applicant's Signature

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Date

**The Community Foundation of Southwest Kansas reserves  
the right to disqualify incomplete applications.**

***Funds are limited. Completion of the scholarship application does not guarantee an award.***

**FINAL DEADLINE IS FEBRUARY 3, 2025.**

**Return this application to:** Community Foundation of Southwest Kansas Scholarship Committee,  
P.O. Box 1313, Dodge City, KS 67801-1313 Phone: (620) 225-0959. Applications may also be dropped off at  
the Foundation office, 208 W. Wyatt Earp, Ste. 200, Dodge City, KS 67801. Additional copies may be printed  
from our website at [www.communityfoundationswks.com](http://www.communityfoundationswks.com).