

JOEL KUDYM MEMORIAL COLLEGE/VOCATIONAL GRANT APPLICATION

\$1,500 SCHOLARSHIP AWARDED TO THE TOP APPLICANT

Background:

Joel Kudym attended Omaha Central High School from 1993 to 1996. Formal education was difficult for Joel, but he applied himself and graduated from Central in 1996. His life tragically ended June 18, 1997. The Kudym family started a scholarship fund in 2002 with the first Annual Joel Kudym Memorial Golf Outing. We invite you to apply for this scholarship and wish you the best in your future goals.

Criteria:

Each year the Scholarship Committee ranks applications based on a variety of factors. Factors include financial need, a strong will to succeed, community service and a good attendance record. The committee focuses on students who clearly communicate their passion to pursue a specific career and show interest in that career path either through good grades in related classes, an experience in a part-time job (or volunteer work) or from a mentor.

Sincerely,

Kudym Family and Friends

JOEL KUDYM MEMORIAL COLLEGE/VOCATIONAL GRANT APPLICATION

The **Joel Kudym Memorial Foundation** strongly believes it is the *student's and not the parent's* responsibility to submit information and correspond with the Scholarship Committee. For that reason, we require correspondence from the students.

Students must meet the following guidelines to apply:

1. Applicants must be enrolled or in the process of being enrolled full time in an accredited institution including but not limited to: a university, college, technical institute or trade school, public or private.
2. Applicants must have a minimum grade point average of 2.0 on a 4.0 scale.
3. Scholarship will be disbursed upon proof that student is enrolled full time. Full time will be defined by the standards used by the institution of higher education attended.
4. Scholarships may be discontinued at any time at the Scholarship Committee's discretion.

Information and Instructions for Applicants

1. Completed applications must be returned **by April 15, 2024** to:
 - Central High School applications should be returned to Angela Meyer at the Central Guidance Center. **Include copy of grade transcript.**
 - Other applications should be returned to:
Joel Kudym Memorial Foundation
4510 Pacific Street
Omaha, NE 68106

**** If you would like to include a recommendation from a teacher, counselor or mentor, you may include it with this application or have them send it to the address listed above. ****

2. The following items are a requirement for consideration which must be submitted with the application. Complete application in its entirety; incomplete forms will not be considered.
 - a. **Student Essay**
The student must submit an essay describing the student's interests, why the student should be considered for a scholarship, description of student's family, educational goals, and career goals. Please provide information on what has motivated you to pursue further education and why you feel such education will improve your quality of life.
 - b. **Student Information Questionnaire**
 - c. **Financial Assistance Questionnaire**

Student Information Questionnaire

ADDRESS INFORMATION

[] Mr. [] Ms. _____
(Last) (First) (M.I.)

Permanent Address:

(Street) (City) (State) (Zip)

Indicate "Best" Mailing Address:

(Street) (City) (State) (Zip)

Date of Birth:

(month, day, year) () ()
Home Phone Number

Email Address:

() ()
Cell Phone Number Dorm Phone Number

Name of Parent(s)/Guardian

Permanent Mailing Address of Parent/Guardian if Different From Applicant

()
Parent/Guardian Telephone Number

SCHOOL DATA

A. Name of high school _____

B. Names of post-secondary schools in which student is interested in attending (in order of preference):

_____ 4 Year College [] Vo-Tech []
Community College [] Other []

_____ 4 Year College [] Vo-Tech []
Community College [] Other []

_____ 4 Year College [] Vo-Tech []
Community College [] Other []

C. Intended major or vocational program

SCHOOL DATA (Cont'd) ACTIVITIES PROFILE
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Please attach resume or CV and fill out the table below.

ACTIVITY	LEADERSHIP ROLE OR POSITION HELD	HONORS OR AWARDS	9	10	11	12

Financial Assistance Questionnaire

PARENT'S INCOME, EXPENSE, AND ASSET DATA
<p>Please have your parents attach the information described in number one below and fill in the blanks in numbers two and three below. If your parents are divorced, both parents must submit the information.</p> <ol style="list-style-type: none"> <li style="margin-bottom: 15px;">1. A signed copy of the first two pages of US 1040 Tax Return most recently filed (or 1040A or 1040EZ). You can white-out social security numbers. <li style="margin-bottom: 15px;">2. Medical/Dental expenses not paid by insurance for the year. \$ _____ <li style="margin-bottom: 15px;">3. Total number of family members who will be attending a post-secondary school at least half time during the following school year, including applicant. _____ <li style="margin-bottom: 15px;">4. Expected "Estimated Family Contribution" (EFC) from FAFSA (Free Application for Federal Student Aid). \$ _____

OTHER GRANTS OR SCHOLARSHIPS

Please list below the name and amount of any grants or scholarships you have been awarded for the upcoming school year.

Name of Grant or Scholarship	Amount
_____	\$ _____
_____	\$ _____
_____	\$ _____

TRANSCRIPT INFORMATION

The following section must be completed by an appropriate school official.

Applicant cumulative grade point average _____

_____	_____
School Official's Signature	Title
_____	_____
Date	Telephone Number

Please include grade transcript from high school

In submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge. Falsification of information may result in termination of any scholarship granted.

_____	_____
Applicant's Signature	Date

_____	_____
Parent/Guardian Signature	Date