

***University Club of Grand Rapids***  
**SCHOLARSHIP APPLICATION 2018-2019**

**Application Deadline: Wednesday, February 1, 2018**

*Please note: our Scholarship has been confused with the University of Michigan Club of Grand Rapids Scholarship. Our Scholarship has no affiliation with the University of Michigan, or the University of Michigan Club of Grand Rapids.*

The University Club of Grand Rapids Scholarship Foundation has been established with the purpose of assisting students who express a strong desire to remain in or return to West Michigan upon completion of their studies. Applicants may attend any college or accredited vocational school: in-state, out-of-state, 2-year or 4-year program.

Please contact Laurie Kelbel, General Manager, or Tawwney Sayre, Marketing Director,  
at the University Club of Grand Rapids with any questions: 616-456-8623.

**CHECKLIST FOR THE APPLICATION**

1. Complete application, answering all questions. Sign and date application.
2. Attach the following material to your application:
  - a. Statement of goals.
  - b. Copy of official current high school transcript.
  - c. Two letters of reference, including one from a teacher, counselor or administrator of the high school you are attending. Do not send a letter of reference from a relative.
3. Send, Email or Fax application and attachments to:

Tawwney Sayre  
University Club of Grand Rapids  
111 Lyon NW, Suite 1025  
Grand Rapids, Michigan 49503

Email: Mail@UClubGR.com  
Fax: (616) 456-8639
4. Complete the top half of the Verification of Enrollment page and submit the form to your high school Guidance Office. The Guidance Office should complete the bottom portion of the form and submit the completed form to the University Club by Wednesday, February 1, 2018.

Scholarship winners will be announced and notified by April 10, 2018. Scholarship payment will be made on behalf of the winners directly to the college, university or accredited vocational school upon confirmation of registration.

## UNIVERSITY CLUB OF GRAND RAPIDS SCHOLARSHIP APPLICATION FORM

Completed application must be postmarked by February 1, 2018 to:  
University Club of Grand Rapids, 111 Lyon NW, Suite 1025, Grand Rapids, Michigan, 49503

**NOTE:** *The amount of this scholarship is \$1,000.00. It may be renewed for three (3) additional, consecutive years upon completion of a Renewable Application Form. The student must also maintain a GPA of 3.0 or higher (or comparable performance) each year for renewal. This scholarship has been established with the purpose of assisting a student who expresses a strong desire to remain in or return to West Michigan upon completion of their studies.*

Applicant must be in good standing as a senior in high school within Allegan, Kent, Muskegon or Ottawa County. Going into the senior year, the applicant must have a cumulative unweighted GPA of 3.0 or higher and maintain an unweighted GPA of 3.0 or higher for the remainder of the school year. Financial need will be considered and may be addressed in the accompanying Statement of Goals, if applicable. An interview may be required.

**First Name:** \_\_\_\_\_ **Middle Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

**Social Security Number:** XXX-XX- \_\_\_\_\_ (last 4 digits)

**Current Mailing Address:**

**Street:** \_\_\_\_\_ **Apt:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Phone (land line, not cell):** (        ) \_\_\_\_\_ **Cell Phone:** (        ) \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Current High School:** \_\_\_\_\_

**Expected Date of Graduation (Month/Year):** \_\_\_\_\_ **Current Cumulative Unweighted GPA:** \_\_\_\_\_

**Are you a U.S. Citizen:**  Yes  No

Have you ever been convicted of a crime?  No  Yes

Have you ever been disciplined for misconduct, suspended, expelled or asked to withdraw by any school?

No  Yes

*If the answer to either of these questions is "Yes," please attach a thorough explanation not to exceed one page.*

Test	Date Taken	Scores
ACT	_____	_____
SAT	_____	_____

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SCHOLARSHIP APPLICATION FORM**

**Statement of Goals:** Attach an essay (not to exceed two double-spaced typewritten pages) including:

- Why you are interested in attending college or vocational school
- What you hope to accomplish with a degree
- Why you wish to remain in or return to West Michigan following the completion of your studies
- Community service you have performed, if applicable
- Jobs you have held, if applicable
- *Optional: Financial need*

**Letters of Reference:** Attach two letters of reference. At least one letter should be from a teacher, counselor or administrator of the high school you are currently attending. Letters of reference should not be from relatives.

**Transcript:** Include a current official transcript from your high school.

**Signature:**

I certify that the information submitted in this application and any attached material is complete and accurate to the best of my knowledge. I agree to notify the University Club of Grand Rapids of any changes in the information included in this application that might affect my eligibility for a scholarship. If selected to receive a scholarship, I agree that my name, likeness and selected information contained in my application may be used for promotional purposes by the University Club without further compensation or notification.

**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**UNIVERSITY CLUB OF GRAND RAPIDS SCHOLARSHIP APPLICATION FORM**  
**VERIFICATION OF ENROLLMENT STATUS AND GPA**

**Applicant Information – To be completed by student.**

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

Address: \_\_\_\_\_ Apt. #: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Social Security Number: XXX-XX-\_\_\_\_\_ (last 4 digits only)

**Authorization to Release Information:**

I authorize (name of High School) \_\_\_\_\_ to provide the University Club with my enrollment status and GPA for use in the scholarship selection process.

Student signature (required) \_\_\_\_\_ Date \_\_\_\_\_

Parent/Step-Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_  
*(Required for students with dependent status)*

**\*\*Applicant Stop Here - Send the entire page to your High School Guidance Office for completion \*\***

Name of High School Representative completing this form:

Please Print: \_\_\_\_\_

Contact Phone Number: (         ) \_\_\_\_\_

I certify that (student's name) \_\_\_\_\_ is a senior student in good standing at

\_\_\_\_\_ High School. His/Her cumulative unweighted GPA is \_\_\_\_\_.

\_\_\_\_\_  
Signature of High School Representative

\_\_\_\_\_  
Date

**Mail, Email or Fax this completed page by February 1, 2018 to:**

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Grand Rapids, Michigan 49503  
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