



MCPHERSON COUNTY
**Community
Foundation**

Scholarship Fund Worksheet

Demographic Information

Desired Name of Fund/Scholarship _____

Donor Name _____

Address _____ City _____ Zip _____

Telephone _____ Email _____

Established in memory/honor of _____

Intended means of contribution (cash, stock, property) _____

Expected Amount of Gift _____

Attach: Biographical information about the person for whom the scholarship is named (e.g. interest in education, career, family) will help our office publicize a gift in memory/honor of the person.

Scholarship Guideline Options

Criteria – select the criteria the scholarship recipient will be required to meet:

Attend specific geographical area: _____ If so, parameters: _____

SAT/ACT scores of: _____

Pursuing a specific Field of Study: _____ If so, which: _____

Exhibit Financial Need: _____

Type of school (i.e. community college, trade school, university, private or public)

Does the student need to be enrolled full time? _____ Yes _____ No

Does the student need to currently be a high school Senior or can an adult or current college student apply? _____

Participation in Extracurricular Activities: _____

Membership with specific club/organization: _____

Scholarship Schedule

Typically, February 15 is the deadline for submitting applications to funds administered by the McPherson County Community Foundation. In certain circumstances, it can be set to an earlier or later date. If you would like to request a different date, please indicate the time frame and reason for change: _____

The amount of the award is dependent on the size of the Fund (i.e. a \$10,000 endowment will provide approximately one \$500 scholarship). Please complete the following according to your preferences:

Renewable for subsequent years: Yes ____ No ____ If Yes, how many years: _____

As the Fund appreciates over time, would you prefer to (check one):

____ Increase the number of scholarships given

____ Increase the size of the scholarship award

If there are no students who meet the scholarship requirements, the scholarship dollars remain as part of the fund principal.

The Selection committee is typically three to seven people. Donors or family members may not make up a majority of the committee. Preferably list members by position, not name, i.e. President of xyz bank, Principal of xyz high school, Teacher of xyz high school, Pastor of xyz church. It is common to name the High School or Church Scholarship Committee that is already in place.

Please include other ideas you may have in reference to distribution, publicity and administration of the fund:

Please fee free to contact our office to review the details of the fund:

Becky Goss, President/CEO
McPherson County Community Foundation
1233 N. Main, McPherson, KS 67460
620-245-9070 or toll free 1-866-245-9070
Fax 620-245-0238
Email: becky@mcphersonfoundation.org
www.mcphersonfoundation.org