

Arnold Wilmott Scholarship Fund

14078 E. Lambert Road.
Whittier, California 90605
(562) 693-5566

E-Mail: Willmottscholarship@gmail.com

Undergraduate Scholarship Program

GUIDELINES AND INSTRUCTIONS

School Year: 2016 – 2017

Application Deadline: March 15, 2016 postmark

Purpose/General Information

Arnold Wilmott Foundation (AWF) provides educational opportunity for those individuals with demonstrated high academic achievement, financial need, and the greatest potential for using education to improve their lives. The guidelines established by the Scholarship Committee of the Foundation commit us to select for funding those applicants who show the following:

- **personal commitment** to educational goals
- **readiness for higher education** through clear and realistic educational plans
- **promise of success** made evident by a track record of responsibility and persistence

NEW APPLICANTS

Eligibility Criteria

- A U.S. citizen
- A current resident of California for at least one year
- A high school senior for the 2015/2016 school year
- Hold a minimum 3.5 cumulative un-weighted grade point average (GPA)
- Will attend an accredited 4-yr. Institution of higher learning as a full-time Freshman in the Fall of 2016
- In need of financial assistance to continue your education

Supporting Documents

- A scholarship application form
- A personal essay
- A certified high school transcript
- Copy of SAT, ACT, or Entrance Exam Scores (if not included on transcript)
- Two (2) recommendation letters
- A copy of the Free Application for Federal Student Aid (FAFSA)
- Parent(s) Financial Information – 2014 Federal 1040 tax form and Parent(s) Untaxed Household Income and Benefit form (Form 1 – New Awards)
- Proof of Citizenship (if applicable)
- Masonic Relative Information Form (if applicable) (Form 2 – new awards)

Suggestions For Completing The Application Procedure

The application can be a source of unnecessary anxiety for some students. AWF is providing a few suggestions that we hope you will find helpful:

- Be sure to read all related information and instructions before formulating your responses.
- Start working on the application form right away.
- Mail only the documents that are requested.
- Retain a photocopy of the packet for your file in case the original packet is lost or damaged in the mailing process.
- Mail the packet as soon as you have finished.
- Immediately notify AWF of any changes after submitting the application packet.

The completed application form is confidential. The information requested is essential to fair and just consideration of the application.

Application Instructions

- Application must be typed or printed in black ink.**
- A response to all questions on the application form is mandatory.**
- Place the application packet in order (refer to the “Application Checklist” form).**
- Do not staple or fasten in any manner.**

- Personal Essay**
Type on a separate sheet with your name at the top and enclose it with your application. The essay should be a biography about your background, your family, yourself as an individual, your experiences and accomplishments, and points of view you would bring to society. AWF uses the essay to learn more about you. It also gives AWF the opportunity to consider attributes and experiences that may not be evident through a review of your academic record. It should be no more than two (2) pages.

- Certified High School Transcript**
It must include all grades from 9th through 11th grade, plus current year on-going classes. Only the **cumulative un-weighted overall GPA** will be considered.
We strongly suggest you emphasize these requirements to the registrar or career counselor. **AWF will not process your application packet if the cumulative GPA is not included in the transcript.** A sample of “Parental Authorization for Release of School Records” form (Form 3 - New Awards) is enclosed to help you obtain the correct information from your school.

- Copy of SAT, ACT Test Score Report or entrance Exam Scores**
Applicant must submit a copy of one of these reports **only** if the SAT or ACT score is not included on the high school transcript. College Entrance Exams may be substituted if taken.

- Two (2) Recommendation Letters** (only submit 2)
Preferably typewritten on 8.5 x 11” sheets of paper and they should be from:
 1. An academic recommendation from your high school administrator, teacher or counselor (preferred on school letterhead).
 2. A personal recommendation from an adult friend (no relatives or members of your family) who has known you for two or more years.

- FAFSA**
AWF uses the same, specific definition of financial need used by Federal and state governments and by colleges. For this reason, AWF requires all applicants to file a Free Application for Federal Student Aid (FAFSA).

- Parent(s) Financial Information** (This information is the same as that requested on the FAFSA)
Parent(s) is(are) defined as:
 1. both your natural parents IF they are both living and married to each other; **OR**,
 2. your legal guardian; **OR**,
 3. if your natural parents are separated or divorced, the parent you lived with most during the last 12 months or who provided more financial support during that time. If this parent has remarried, your stepparent must be included.

It is mandatory for applicant to submit one of the following documents in order for AWF to process your application:

- 1) Parent(s) 2014 Federal 1040 tax form(s), all copies of W-2's, and the “Parent(s) Total Untaxed Household Income & Benefits” form (Form 1 – New Awards).

OR

- 2) If your parents are not required to file a federal tax return, notify AWF in writing and complete the “Parent(s) Total Untaxed Household Income & Benefit” form.

Applications will not pass through the initial screening if the necessary financial information is not included in the application packet. AWF understands that the IRS does not require income tax forms to be filed until April 15, but we must make our decisions prior to this date.

Proof of Citizenship (if applicable)

If applicant is a naturalized US citizen, you must submit a copy of your citizenship paper or copy of your passport. **If you are a legal resident but not a U.S. Citizen, you are not eligible.**

Masonic Relative Information Form (If applicable) (Form 2 – New Awards)

The Masonic relative must be a California mason who is or was in good standing with a **California Masonic Lodge only**. The relationship to applicant is strictly limited to: **father, grandfather, stepfather, uncle or brother**. A Masonic relative is not required to apply for an AWF scholarship.

Failure to follow the above instructions will result in disqualification

Determination of Award

All applications will be screened by AWF staff in March and early April. Evaluation is based on:

- Applicant's academic achievement
- Financial need
- Applicant's essay

Finalists are selected on a competitive basis from the pool of applicants who meet all eligibility criteria. Successful candidates will be asked to submit additional documents and may be invited for personal interviews by members of the AWF Trustees. No application material will be returned. No exceptions will be made.

Awards Amount

Awards typically range from \$2,500 to \$10,000 per academic year for full-time enrollment and are renewable for three (3) consecutive years with a total of four (4) years. All awards are subject to availability of funds. Priority funding is given to renewing eligible applicants, followed by new applicants.

Announcement of Awards

AWF will notify in writing **only** those selected for a scholarship. **Announcements will be mailed in early May. A list of winners will be posted on the CMF Website - www.californiamasons.org**

Nondiscrimination Statement

AWF does not unlawfully discriminate on the basis of race, color, religion, gender, national origin, ancestry, age, medical condition, disability, sexual orientation, or any other characteristic protected by law.

Applicant's Responsibilities

- You are responsible to read, understand, and fill out this application accurately and completely, and to comply with all deadlines.
- You are responsible for submitting all requested information.

Arnold Wilmott Scholarship Fund Application Checklist 2016/2017 School Year

This sheet must be included in the application packet.

Student Name: _____

Social Security Number: _____

To be accepted for consideration, an applicant must submit **ALL THE FOLLOWING SUPPORTING DOCUMENTS IN ONE PACKAGE** as listed below.

✓ Check these off as you complete them:

- Application Form
- Personal Essay
- Certified High School Transcript
- Copy of ACT, SAT or Entrance College Exam Scores (only if not included on transcript)
- Two (2) Recommendation Letters
- Copy of Free Application for Federal Student Aid (FAFSA)
- Parent(s) 2014 Federal 1040 tax form(s) [including copies of all W-2's]
- Parent(s) 2014 Total Untaxed Household Income & Benefits Form (Form 1 - New Awards)
- Masonic Relative Information Form (if applicable) (Form 2 - New Awards)
- Copy of Citizenship (if applicable)

“Frequently Asked Questions” and “Application Form” are also available..

Incomplete applications or application packets will be immediately disqualified with no further follow-up.

Applications postmarked after the deadline will be immediately disqualified with no further follow-up.

Unsigned applications will be immediately disqualified with no further follow-up.

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**Parent(s) Total Untaxed Household
Income & Benefits Form**

Student Name: _____

Social Security Number: _____

Please use **yearly total income** for 2014.

<u>Description</u>	<u>Amount \$</u>
1. Untaxed Social Security Benefits Write in the amount of untaxed social security benefits (including Supplemental Security Income) that your parent(s) received in 2014. Be sure to include the amounts that your parents received for you and their other children.	_____
2. Aid to Families with Dependent Children (AFDC/ADC) Do not include social security benefits here.	_____
3. Other untaxed income and benefits i.e. welfare benefits (except AFDC or ADC), housing, food, non-taxable disability income and other living allowances (excluding rent subsidies for low income housing)	_____
4. Child support <u>received</u> for all children in your household Include support received for the student and/or other children.	_____
5. Children support <u>paid</u> for all children in other households	(_____)
6. Total (Add lines 1, 2, 3 and 4, minus line 5)	_____

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MASONIC RELATIVE INFORMATION FORM

Student's Name: _____

Social Security Number: _____

Applicant only needs to complete this form if they have a father, grandfather, stepfather, uncle or brother who is or was a California Mason in good standing. *A Masonic relative is not a requirement to apply for the AWF scholarships.*

1. _____
First Name Middle Name Last Name

Relationship to Student: (circle one) father, grandfather, stepfather, uncle, brother

Date of Birth: ____ / ____ / ____ Date of Death: (If applicable) ____ / ____ / ____
Mo. Day Yr. Mo. Day Yr.

Lodge Information: _____ # _____
Name of Lodge LodgeNumber City/State

2. _____
First Name Middle Name Last Name

Relationship to Student: (circle one) father, grandfather, stepfather, uncle, brother

Date of Birth: ____ / ____ / ____ Date of Death: (If applicable) ____ / ____ / ____
Mo. Day Yr. Mo. Day Yr.

Lodge Information: _____ # _____
Name of Lodge LodgeNumber City/State

Please attach a copy of membership information (i.e. Membership card, dues card, letter from lodge master, etc.) with this form.

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PARENTAL AUTHORIZATION FOR RELEASE OF SCHOOL RECORDS

To The Parent:

As part of the evaluation process for the Arnold Wilmott Foundation (AWF) Scholarship Program, we must obtain records of grade point average (GPA) and standardized testing. This form is for you to give to the school to insure that we receive the correct information needed to process your child's application.

Please sign this authorization and give it to your child's school secretary, registrar or career counselor. **Do not return this form to AWF.**

To The School Secretary, Registrar or Career Counselor:

In order for the Arnold Wilmott Foundation Scholarship Committee to make an appropriate decision, I request _____ (High School Name) to release an official sealed transcript to _____ (Student Name).

Please note that AWF will not process any scholarship application if the following information is not included:

1. Official transcript must include an **un-weighted** cumulative GPA and all grades from 9th through 11th grade.
2. Only the cumulative un-weighted overall GPA will be considered.
3. An official verification letter from the registrar or career counselor will be accepted if the official transcript does not include the un-weighted cumulative GPA.
4. ***The official transcript and the verification letter must be in a sealed envelope.***

Please release the official transcript to my child so it can be included in the application packet.

Signature of Parent

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**2016-2017 UNDERGRADUATE
 SCHOLARSHIP APPLICATION**

•APPLICATION DEADLINE – March 15, 2016•

All material must be postmarked no later than March 15, 2016, or must be submitted to the office of Arnold Wilmott Scholarship Fund by 4:45 pm on March 15, 2016.

•VERY IMPORTANT•

You must read the “Guidelines and Instructions” before starting this form!

Date: _____

I. Applicant’s Personal Information

Social Security # _ _ _ - _ _ - _ _ _

Student Name _____
Last, First, Middle Initial

Sex: Male Female

Permanent Address (all mail will be sent to permanent address):

_____ Street Address

_____ City State Zip Code

Telephone: (_ _ _) _ _ - _ _ _ Fax: (_ _ _) _ _ - _ _ _

E-Mail Address: _____

Date of Birth: _____ Birthplace: _____
Mo./Day/Yr. State or Country

FOR OFFICE USE ONLY

RANK _____

College _____

Application checklist
 Application form
 Personal essay
 HS transcript
 Recommendation letter - School
 Recommendation letter - Friend
 Copy of FAFSA
 1040 Tax Form _____ yr.
 Total untaxed household income & benefits Form
 Masonic Relative Form
 College acceptance letter _____

Un-weighted GPA _____

SAT - Verbal _____ Math _____

ACT - _____

Sports Music
 MR _____ MYO _____

Single Married Divorced Widow

AGI \$ _____

CMF AGI \$ _____

Exemptions _____

Authentication _____

Fund Name _____

Trustee _____

Lodge # _____

Student is a:

- A. U.S. citizen
- B. Current resident of California for at least one year
- C. Naturalized citizen. Date of citizen certificate _____
Mo./Day/Yr.
- D. Legal resident, but not a U.S. citizen

II. Applicant's Academic Information

Current High School _____ Current Grade _____

School Address _____
Street

_____ City State Zip Code

School Telephone: (____) _____ - _____ Fax: (____) _____ - _____

Principal's Name _____ Dr. Mr. Ms.
Last, First,

Cumulative un-weighted GPA: _____ SAT Score Verbal _____ Math _____
Or ACT Composite Score _____

III. Applicant's College/University Plans

List the universities to which student has applied (List only your top 3 choices starting with your first choice.)

Name	Address, City, State & Telephone	2 yr.	4 yr.

Course of study: Proposed major _____

Planned vocation _____

IV. Applicant's Activities/Working Information

(Do not attach an additional sheet with this information.)

A. Extra-curricular activities in which student has taken an active part while in high school

Activities	Description	Hrs. Per Week	Dates Involved	
			From Mo/Yr	To Mo/Yr
Sports				
Music				
Drama/Performance Dance				
Community Service				
School Spirit Activities				
Other				

B. List of organization(s) to which student belongs to outside of school

Name	Brief description of the Organization and your responsibilities within it

C. Student's employment status - (List paid work experience (most recent experience first))

Employer	Job Description	Avg. hrs. per/ wk	Compensation

D. List volunteer work experience outside of school (most recent experience first)

Organization	Job Description	Avg. hrs. per/ wk	How long

V. Applicant's Family Information

A. Financial Statement

- This section is to be completed by your parents. Your parents **must** complete this statement. If parents are divorced, supply information for custodial parent and include any financial support from the other parent. If custodial parent has re-married, information for the stepparent must be supplied.
- **DO NOT LEAVE INCOME FIGURES BLANK OR PUT ALL ZEROS.** Everyone must have some source of income, be it from a job, government assistance, or from savings/investments. **Application will not be considered if this page is incomplete. Please contact us if your parents are not your source of income.**

Mother: (or stepmother)

Father: (or stepfather)

Name _____

Name _____

Address _____

Address _____

City/State/Zip _____

City/State/Zip _____

Home Phone (____) _____ - _____

Home Phone (____) _____ - _____

Marital Status: Single Married
 Divorced/Separated Widowed

Marital Status: Single Married
 Divorced/Separated Widowed

Employer _____

Employer _____

Occupation _____

Occupation _____

Work Phone (____) _____ - _____
Ext. _____

Work Phone (____) _____ - _____
Ext. _____

Work Fax (____) _____ - _____

Work Fax (____) _____ - _____

2014 Total Salary (W2s) : \$ _____

2014 Total Salary (W2s) : \$ _____

Amount of Other Taxable Income (yearly): \$ _____

Amount of Other Taxable Income (yearly): \$ _____

Specify Source of Other Taxable Income: _____

Specify Source of Other Taxable Income: _____

Parents' combined 2014 adjusted gross income (AGI) - based on tax form 1040 \$ _____

Number of exemptions(s) - including student (based on line 6d Exemptions of Tax Form 1040) _____

B. Applicant's Sibling Information (exclude applicant):

Name	Age	Relationship to Applicant	School/Occupation

C. Describe briefly if your family has **unusual financial circumstances** (i.e. loss of employment or major long term medical expenses) that might affect your need, and give an itemized actual or/estimate of yearly losses or expenses:

VI. Applicant's Masonic Information

A. Relative's Masonic Information:

Do you have a father, grandfather, stepfather, uncle or brother who is, or has been, a member in good standing with a **California Masonic Lodge**?

No **Yes** (Complete Form 2 - Masonic Relative Information Form)

B. Applicant's Masonic Information:

Are you, or have you been, a member of Job's Daughters, DeMolay or Rainbow Girls?

No **Yes** (Complete the box below and include a copy of your Membership card)

Name of Organization	Chapter/Assembly/Bethel

VII. Statement by Applicant:

I have read the guidelines, and I certify that all information submitted in the application material is true and correct.

I agree to provide proof of all statements, including tax returns, citizenship papers, or any other documents requested. I understand that failure to provide these documents will result in termination of my application.

I authorize my chosen college/university to release to AWF information pertaining to my academic record, financial aid eligibility, and the amount and type of aid or benefits received. This information is to be used solely for the purpose of determining my eligibility for AWF programs.

I authorize AWF to disclose, only as necessary, any confidential information or directory information such as names and addresses that it may receive in connection with this application.

Applicant's Signature

Date

VIII. Statement by Parent(s) or Guardian:

I have read this application, attest to the accuracy thereof, and understand that my child, _____, is applying for a AWF scholarship.

I fully understand my responsibilities as detailed herein, and authorize AWF to release any confidential information, only as necessary, in processing this application.

Parent/Guardian Signature

Date