SIGMUND FOUNDATION SCHOLARSHIP

The Sigmund Foundation Scholarship was established to provide financial assistance to *needy* residents of Jackson and Lenawee Counties Michigan: graduating high school seniors, students already enrolled in college as full or part-time *undergraduate* students or adult residents interested in furthering their undergraduate educations. The scholarship of up to $6,000 can be renewed (up to $24,000 over four years) through the application process. Although not limited to any specific field of study, priority will be given to students majoring in the Nursing or Aviation fields. Priority will also be given to those with the *strongest financial need*. All applicants will be notified of award decisions via E-mail in mid-July.

Eligibility Criteria:

* Jackson or Lenawee County resident
* Acceptance at an accredited college or university
* Proof of financial need
* Cumulative grade point average of 2.5 or higher
* Completion of the Free Application for Federal Student Aid (FAFSA)

Scholarship Award:
Up to $6,000 depending upon the number of credit hours taken each semester. The award will be split between two semesters.

Requirements:
The following must be submitted to the Sigmund Foundation. We prefer that application be completed and returned on-line.

- **Completed scholarship application** and **essay** *written by applicant*.
- An **official** cumulative *transcript* through the most recent term.
- Copy of the page from the most recent **Federal** ***family tax return that shows the adjusted gross income.***
- Completed copy of the **Financial Information Summary Sheet** (attached to this form) and completed by the school that you plan to attend.

It is the *responsibility of the applicant* to make certain that all requested material is sent to the Foundation. See instructions for returning your applicaiton

For questions: E-mail sigmundfoundation@sbcglobal.net.

SIGMUND APPLICATION INSTRUCTIONS

***Application**: The two-page signed application and essay must be written by applicant, *not parent*.

***FAFSA:** All applicants must complete the Free Application for Federal Student Aid. Do not include your FAFSA in your application.

Essay**: Two-page type-written, double spaced ***essay describing *your life and why you are selecting your particular field of study* – *written by applicant*, only.

Transcript**: An ***official transcript. Ask your school to E-mail a copy directly to us. If available, include ACT/ SAT scores only if you are a graduating high school senior. ***Copies made by you are not acceptable.***

Tax Returns:** Most recent copy of your parents Federal Income Tax return, **only the page** that shows the *adjusted gross income*. * Black out all Social Security Numbers. (* Do not send Michigan tax forms.) * *If parents are divorced*, send the tax forms of the parent *who claims you*. * If your parents are on *disability* and do not fill out tax forms, send some type of government proof such as a letter that your parent has received in the past stating that he/she is on disability. ***Although you may have worked this past year and filed a tax return, FAFSA is based on your parent's income.

***College Financial Information**: **Financial Information Summary Sheet** completed by the school you plan to attend. It will be returned to you and included in your application.

***Residency: If you do NOT reside in Jackson or Lenawee counties but go to a Jackson or Lenawee school, you do NOT qualify for a Sigmund Scholarship.**

*Sending your application: We prefer that application be submitted on-line. However, if you are unable to do this, please E-mail a copy to sigmundfoundation@sbcglobal.net OR mailed to: Sigmund Foundation, PO Box 1128, Jackson, MI 49204. DEADLINE IS APRIL 15.

Questions: We prefer that all questions be addressed via the Internet by the applicant, *not the parent*. Our E-mail address is **sigmundfoundation@sbcglobal.net** All applicants will be notified one way or the other by E-mail on or before July 15. *Please do not call for outcomes.*

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Application – Page 1

A. Application Information:

First/Middle/Last Name:

Permanent Address: _____

City/State/Zip:_____

Date of Birth: _____

Phone: _____ E-mail Address (required):_____

Reprint E-mail Address: _____

High School: _____ Graduation Date: _____

Residency: Jackson County_____ Lenawee County_____

Name of father/stepfather/guardian: _____

Address: _____City/State/Zip: _____

Occupation: _____Employer: _____

Name of mother/stepmother/guardian: _____

Address: _____City/State/Zip: _____

Occupation: _____Employer: _____

Check if applicable: _____ Father deceased _____ Mother deceased _____ Parents divorced

Ages of children *living at home* **DO *NOT* INCLUDE YOURSELF.** _____ Number of family members in college that *live at home* **DO *NOT* INCLUDE YOURSELR**. _____

B. Personal Information: ***(For Independent Students, only.)***

Martial Status: Single_____ Married_____ Divorced_____ Widowed_____

Number of Children Living at Home and Ages_____ Number of family numbers in college that live with you, **DO NOT include yourself**: _____

C. College/University Information:

Year in college during the coming academic year: Fr.___ So. ___ Jr.___ Sr. ___

School you are planning to attend: _____City/State of School: _____

Full-time Student: ____Part-time Student: ____ if part-time, number of credits per semester: ___

Major Field of Study: _____

Sigmund Foundation Scholarship

Scholarship Application – Page 2

D. School and Community Activities

Using **only the spaces below**, list major extracurricular, community, and religious activities in which you have participated during the past four years. Please list the activities in order of importance.

Use only this sheet. Additional attachments will not be accepted.

Activity	# of Years	Leadership Positions, Awards, Recognition
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

E. Work Experience

Using **only the spaces below**, please list your paid work experience during the past four years, beginning with your most recent position.

Employer	**Nature of Work**	**Dates**	**Hours/Week**
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

F. Additional information /circumstances that you would like the scholarship committee to know, particularly your financial need:

_____

_____

_____

Certification:

I hereby affirm that the information provided on this form is accurate and complete to the best of my knowledge

Signature: _____ Date: _____

SIGMUND FOUNDATION
FINANCIAL INFORMATION SUMMARY

To the applicant: **Only fill out the top of this form**. *Do NOT fill out the financial information. Once you complete the upper portion of this form (Name, Address, Signature) , send it to the college or university you plan to attend. When it is returned to you, incorporate into your scholarship application packet.*

Name of Student:_____

Student Address:_____City:_____Zip:_____

Signature:_____

To the Financial Aid Office: *Please fill out the following information* ***and return the completed information to the requesting student.*** Information for this coming academic year should reflect the aid package offered to the student.

EFC	$_____
College Cost for this coming year	$_____

Gift Aid	**Amount Offered**
College Gift Aid	
Grants	$_____
Scholarships	$_____
Federal Grants/Pell & SEOG	$_____
Michigan Competitive Scholarship or Grant	$_____
Other Scholarships, Grants or Gifts	$_____

Self-help Aid	**Amount Offered**
Federal Stafford Loan (subsidized only)	$_____
Federal Perkins Loan	$_____
Institutional Loan	$_____
Federal Work-Study (FWS)	$_____
Other	$_____
Total Financial Aid Offered (for the upcoming academic year only)	$_____

Name of College/University: _____

Financial Aid Signature:_____