



Giving Back. Moving Forward.

Sam and Vera Tokoly Educational Endowment Scholarship

In order to be eligible to apply for this scholarship, you must:

- ☐ Be a graduating senior from Boyne City High School who is accepted into and planning to attend a 2 or 4-year college, university or vocational/trade school full time in the fall

GENERAL INFORMATION

Applicant Name: _____
Last First Middle

Mailing Address: _____
Street City State Zip

Telephone: _____ E-mail: _____

COLLEGE PLANS

Name of the college for which financial aid is requested. If unknown, please list in the order of preference where applications have been submitted.

College Name: _____ Location: _____

What course(s) of study do you plan to pursue? _____

TRANSCRIPT INFORMATION

Attach an official copy of your latest academic transcript in addition to providing the following information:

Cumulative GPA: _____

PROOF OF ACCEPTANCE:

Please attach a copy of your letter of acceptance into the college, university or vocational/trade school of choice. If you are undecided, please provide proof of acceptance to each school that you are considering.

PERSONAL STATEMENT:

In one typed page or less, attach a personal statement that discusses your personal leadership abilities and how you see yourself contributing to the greater good of others for years to come.

LEADERSHIP ROLES:

Please attach a list of leadership roles/positions that you have held over the past four years of your high school career. On the list, indicate when you held that role/position. (For example: Class President, Senior year or Captain of Basketball Team, Junior and Senior years).

COMMUNITY INVOLVEMENT:

Please attach a list of your community involvement over the past four years of your high school career. On the list, indicate the amount of time dedicated to each of those activities. (For example: Volunteered at Humane Society, 4 hours/month Sept.- Dec., 11th & 12th grades).

CERTIFICATION:

I certify that the information provided in this application is complete and accurate to the best of my knowledge. Falsification and/or incomplete information will exclude me from scholarship consideration.

Applicant Signature _____ Date _____

**Application form is to be handed in to your high school counselor by
Thursday, March 1, 2018**