

Erle and Cynthia Byram Scholarship Fund

Deadline: March 15th

Who Can Apply?	Required Application Materials
 Graduating seniors from any high school in southern Idaho (south of the Salmon River); Enrolling as a full-time first-year student at any public or private junior college, college, university, vocational, or technical school in the state of Idaho; Preference given to residents of Camas or Gooding Counties. 	 Copy of your most recent unofficial high school transcript A written statement (1-3 pages in length) describing the following: Educational, career goals and objectives; Extra-curricular activities, volunteerism, awards, honors, and/or offices held; Work experience and if you plan to work while attending college; Why you should be selected for this scholarship; First page of your of FAFSA Student Aid Report that lists your Student Aid Index (SAI). If you have not received your FAFSA Report, you may substitute it with a brief paragraph explaining your household's current financial situation. Please include household size, whether you have any siblings currently in college, and any extenuating circumstances or additional financial information you would like to share with the committee.

Application Instructions:

- Complete pages 1 & 2 of this application and attach the *Required Application Materials* listed above.
- Combine ALL materials into a single PDF attachment. Google docs will not be accepted.
- Email completed PDF applications to <u>scholarships@idahocf.org</u> *no later than 11:59pm MST on March 15th*. Late/Incomplete applications will not be considered.

APPLICANT INFORMATION	
Your Name:	
Mailing Address:	
City/State/ZIP:	
Permanent Address (if different than above):	
Personal Email:	Cell Phone:
Date of Rirth:	

SCHOOL INFORMATION
High School Name: City/State:
High School Cumulative Unweighted GPA:
Anticipated Date of Graduation:
Please list the post-secondary institution you plan to attend:
Have you been accepted?
Anticipated annual cost of attendance:
What field do you plan to study?
CERTIFICATION
By submitting this application (written or electronically) I consent to the gathering, use and releasing of my information by the Idaho Community Foundation as it relates to the funding of the scholarships. I understand the information is needed for the purpose of the scholarship payments and for normal business operations of the agency. This consent is valid for three years from the date signed, unless I revoke this consent, in writing, to the extent of the information already shared. I certify that the information provided is complete and accurate to the best of my knowledge. Falsification of information may result in termination of any scholarship granted.

If selected for a scholarship, you will be notified by email.

Date____

Questions? Email <u>scholarships@idahocf.org</u> or call (208) 342-3535.

Applicant's Signature (Typed or Written)_____