



## 2017 ENGINEERING SCHOLARSHIP APPLICATION

[www.ariel-foundation.org](http://www.ariel-foundation.org)

Please follow all instructions carefully as you proceed through the application process. Applicants are strongly advised to complete on-screen and print the PDF Form version. Questions may be addressed to Ariel Foundation.

**RETURN APPLICATION AND ATTACHMENTS TO: JANET REYNOLDS, DIRECTOR**

**101 EAST GAMBIER STREET • MOUNT VERNON, OH 43050**

**PHONE: (740) 392-0364 • FAX: (740) 392-0370 • [afdirector@ariel-foundation.org](mailto:afdirector@ariel-foundation.org)**

### GENERAL SPECIAL SCHOLARSHIP PROGRAM REQUIREMENTS

1. Applicant must be a Knox County, Ohio graduate or a resident of Knox County, Ohio at the time of high school graduation to be eligible for a scholarship. Exempt are any employees or family members of employees of Ariel Corporation or Ariel Foundation.
2. Applicant must be enrolled at any four-year engineering college.
3. Applicant must have achieved a 3.0 or better GPA for one year at an accredited college or university prior to acceptance into an engineering college.
4. The attached application form must be completed in its entirety.
5. The included “**Authorization and Release**” form must be signed by the applicant.
6. Include grade transcripts from all high schools, colleges and graduate schools attended (photocopies acceptable).
7. Obtain **two letters of recommendation**. Recommendations should be mailed directly to the Ariel Foundation. One letter should be from the Dean and one from a faculty member of the engineering college.
8. Include a **wallet size photo**. The photo will not be shown to the selection committee, but may be used in a news release to the local media if the applicant becomes a scholarship recipient.
9. It is the responsibility of the applicant to secure all the above information and submit to the Ariel Foundation by the specific deadline date for each scholarship award process.

### SECTION 1 – PERSONAL DATA

NAME \_\_\_\_\_

Last

First

Middle

HOME ADDRESS (street or post office box) \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ COUNTY \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_ S.S. NO. \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ CITIZENSHIP (if other than U.S.) \_\_\_\_\_

### SECTION 2 – ACADEMIC DATA

HIGH SCHOOL FROM WHICH YOU GRADUATED \_\_\_\_\_

OTHER HIGH SCHOOL(S) ATTENDED (state dates) \_\_\_\_\_

STATE YOUR HOME SCHOOL DISTRICT IF YOU WERE OPEN ENROLLED \_\_\_\_\_

DATE YOU GRADUATED (or earned G.E.D.) \_\_\_\_\_ COURSE OF STUDY \_\_\_\_\_

COLLEGE YOU ARE CURRENTLY ATTENDING \_\_\_\_\_

ENGINEERING COLLEGE YOU SEEK TO ATTEND \_\_\_\_\_

DEGREE OR CERTIFICATE YOU ARE PURSUING \_\_\_\_\_

**SECTION 3 – BRIEFLY SUMMARIZE YOUR EXTRACURRICULAR OR COMMUNITY INVOLVEMENT**

**SECTION 4 – DESCRIBE ANY ACADEMIC OR EMPLOYMENT-RELATED HONORS YOU HAVE RECEIVED**

**SECTION 5 – PERSONAL STATEMENT**

**APPLICANTS SHOULD USE THIS SPACE TO DISCUSS ANY (OR ALL) OF THE FOLLOWING: ACADEMIC OR RESEARCH INTERESTS, PROFESSIONAL OBJECTIVES, RELEVANT WORK EXPERIENCE, OR EXTRAORDINARY CIRCUMSTANCES THAT CONTRIBUTE TO THE NEED FOR FINANCIAL AID.**

**SECTION 6 – EMPLOYMENT EXPERIENCE (LIST UP TO 4 JOBS AT WHICH YOU HAVE WORKED)**

EMPLOYER NAME	DATES OF EMPLOYMENT	SUPERVISOR
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**SECTION 7 – POST –SECONDARY FINANCING INFORMATION**

LIST ANY GRANTS AND/OR LOANS YOU HAVE ALREADY SECURED (include sources and dollar amounts)

_____	YEAR _____	AMOUNT _____
_____	YEAR _____	AMOUNT _____
_____	YEAR _____	AMOUNT _____
_____	YEAR _____	AMOUNT _____

**SECTION 8 – FAMILY AND INCOME DATA LATEST YEAR**

**A. IF YOU ARE CLAIMED BY YOUR PARENTS AS A DEPENDENT FOR INCOME TAX PURPOSES, STATE:**

FATHER'S OCCUPATION AND EMPLOYER \_\_\_\_\_

FATHER'S MOST RECENT ADJUSTED GROSS INCOME (IRS FORM 1040, LINE 37 OR 1040EZ, LINE 4) \$ \_\_\_\_\_

MOTHER'S OCCUPATION AND EMPLOYER \_\_\_\_\_

MOTHER'S MOST RECENT ADJUSTED GROSS INCOME (IRS FORM 1040, LINE 37 OR 1040EZ, LINE 4) \$ \_\_\_\_\_

NO. OF SIBLINGS: AT HOME \_\_\_\_\_ IN COLLEGE \_\_\_\_\_ LIVING INDEPENDENTLY \_\_\_\_\_

**B. IF YOU CLAIM YOURSELF FOR INCOME TAX PURPOSES, STATE:**

YOUR CURRENT OCCUPATION AND EMPLOYER \_\_\_\_\_

YOUR MOST RECENT ADJUSTED GROSS INCOME (IRS FORM 1040, LINE 37 OR 1040EZ, LINE 4) \$ \_\_\_\_\_

SPOUSE'S CURRENT OCCUPATION AND EMPLOYER \_\_\_\_\_

SPOUSE'S MOST RECENT ADJUSTED GROSS INCOME (IRS FORM 1040, LINE 37 OR 1040EZ, LINE 4) \$ \_\_\_\_\_

NO. OF FAMILY MEMBERS: LIVING AT HOME \_\_\_\_\_ IN COLLEGE (OTHER THAN YOURSELF) \_\_\_\_\_

**SECTION 9 – AUTHORIZATION AND RELEASE**

I, \_\_\_\_\_, born on \_\_\_\_\_, \_\_\_\_\_, having filed an application for scholarship with the Ariel Foundation, hereby authorize and consent to having an investigation made as to my qualification for scholarship funds from the Foundation. I authorize the Foundation, or any of its employees or agents to seek any information which it may deem relevant from any personal references, any scholastic institutions I have attended and any other person, firm or institution which the Foundation may deem to have information relevant to obtaining information with regard to my application for scholarship. This authorization also permits any person, firm, company or other institution contacted by the Foundation to release the necessary information and to provide copies of any and all documents, records, or other information requested by the Foundation.

I hereby release, discharge and exonerate the Foundation, any of its members and any person furnishing information requested with regard to my application of scholarship from any and all liability of every nature and kind arising out of the furnishing or inspection of such documents, records or other information of the investigation made by the Foundation.

SIGNED BY \_\_\_\_\_ DATE \_\_\_\_\_  
Signature of Applicant

If parent(s) financial data has been reported in this application, their signature(s) is (are) also required.

SIGNED BY \_\_\_\_\_ DATE \_\_\_\_\_  
Signature of Parent

SIGNED BY \_\_\_\_\_ DATE \_\_\_\_\_  
Signature of Parent

**APPLICANT CERTIFICATION**

I hereby verify all of the information contained in this scholarship application, or attached hereto, is accurate.

SIGNED BY \_\_\_\_\_ DATE \_\_\_\_\_  
Signature of Applicant

**PLEASE CHECK ONE OF THE FOLLOWING BEFORE SUBMITTING:**

I am applying for the following:

James P. Buchwald Engineering Scholarship

Tom Rastin Engineering Scholarship

Both