



2021 ENGINEERING SCHOLARSHIP APPLICATION

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 The Ariel Foundation at officemanager@ariel-foundation.org.

RETURN APPLICATION AND ATTACHMENTS BY MAY 1 TO:

JEN ODENWELLER, DIRECTOR

THE ARIEL FOUNDATION

121 EAST HIGH STREET • MOUNT VERNON, OH 43050

PHONE: (740) 392-0364

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 The Ariel Foundation.** Applicant must include parent(s) place of employment under section 8.
2. Applicant must be enrolled at any four-year accredited engineering college and maintain a 3.0 or better GPA.
3. First year applicants 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 and returned to The Ariel Foundation by **May 1**.
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 by the deadline date. One letter from the Dean and one from a faculty member of the engineering college is required.
8. Email a **wallet size photo** to officemanager@ariel-foundation.org. 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 required information and submit it to The Ariel Foundation by the specific deadline date.

SECTION 1 – PERSONAL DATA

NAME _____
Last First Middle

HOME ADDRESS (street and post office box if applicable) _____

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 (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 _____

CURRENT COLLEGE CLASS STANDING: SOPHOMORE JUNIOR SENIOR

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 FOUR JOBS AT WHICH YOU HAVE WORKED)

| EMPLOYER NAME | DATES OF EMPLOYMENT | SUPERVISOR NAME |
|---------------|---------------------|-----------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

SECTION 7 – POST-SECONDARY FINANCING INFORMATION

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

| _____ | YEAR _____ | AMOUNT _____ | LOAN | GRANT |
|-------|------------|--------------|------|-------|
| _____ | YEAR _____ | AMOUNT _____ | LOAN | GRANT |
| _____ | YEAR _____ | AMOUNT _____ | LOAN | GRANT |
| _____ | YEAR _____ | AMOUNT _____ | LOAN | GRANT |

SECTION 8 – FAMILY AND INCOME DATA FOR LAST YEAR

FATHER'S NAME _____

FATHER'S OCCUPATION AND EMPLOYER _____

MOTHER'S NAME _____

MOTHER'S OCCUPATION AND EMPLOYER _____

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

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

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

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) \$ _____

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 the information contained in this scholarship application, or attached hereto, is accurate.

SIGNED BY _____ DATE _____
Signature of Applicant