



## 2026 JAMES P. BUCHWALD 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 The Ariel Foundation at [officemanager@ariel-foundation.org](mailto:officemanager@ariel-foundation.org).

**RETURN APPLICATION AND ATTACHMENTS BY MAY 1 TO:**

**Theresa Morris, Office Manager**

**The Ariel Foundation**

**121 East High Street • Mount Vernon, OH 43050**

**Phone: (740) 392-0364**

**email: [officemanager@ariel-foundation.org](mailto:officemanager@ariel-foundation.org)**

### 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.
2. **Any employee or immediate family member of an employee of Ariel Corporation or The Ariel Foundation is not eligible for this scholarship.** Applicant must include parent(s) place of employment under Section 8.
3. First year applicants must have achieved a GPA of 3.0 or better for one year at an accredited college or university prior to acceptance into an engineering college.
4. Applicant must be enrolled at any four-year accredited engineering college and maintain a GPA of 3.0 or better.
5. The attached application form must be completed in its entirety and returned to The Ariel Foundation by **May 1**.
6. The included **“Authorization and Release”** form must be signed by the applicant.
7. Include grade transcripts from all high schools (first time applicants only), and colleges attended (photocopies acceptable).
8. Obtain **two letters of recommendation**. You may either request recommendations be e-mailed to Theresa Morris at the e-mail above, or 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 on their letterhead is required.**
9. It is the responsibility of the applicant to secure all the required information and submit it to The Ariel Foundation by the deadline date.
10. Scholarship funds up to \$5,000 each may be used to cover the cost of student tuition, fees, books, and room and board expenses associated with completing an engineering degree as billed and managed through the Office of the Bursar of a qualifying institution.

### SECTION 1 – PERSONAL INFORMATION

Name \_\_\_\_\_  
Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Home Address (Street/PO Box if Applicable) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Date of Birth \_\_\_\_\_ Citizenship (If Other Than U.S.) \_\_\_\_\_

### SECTION 2 – ACADEMIC INFORMATION

High School From Which You Graduated \_\_\_\_\_

Other High School(s) Attended (Dates) \_\_\_\_\_

Your Home School District if You Were Open Enrolled \_\_\_\_\_

Date You Graduated (or Earned G.E.D.) \_\_\_\_\_

College You Are Currently Attending \_\_\_\_\_

Accredited Engineering College You Seek to Attend/Are Attending \_\_\_\_\_

Degree or Certificate You Are Pursuing \_\_\_\_\_

College Grade Level at Start of New Academic Year:	2 <sup>nd</sup> Year Undergraduate/Sophomore	3 <sup>rd</sup> Year Undergraduate/Junior
	4 <sup>th</sup> Year Undergraduate/Senior	5 <sup>th</sup> Year Undergraduate/Senior

### **SECTION 3 – EXTRACURRICULAR/COMMUNITY INVOLVEMENT**

**Please summarize recent and present community involvement activities (at home and/or at college).**

### **SECTION 4 – ACADEMIC OR EMPLOYMENT-RELATED HONORS AND RECOGNITION**

**Please describe any academic or employment-related honors and recognition you have received.**

### **SECTION 5 – PERSONAL STATEMENT OF SCHOLARSHIP NEED**

**Applicant should use this space to discuss any (or all) of the following: academic or research interests, professional goals, relevant work experience, and any extraordinary circumstances that contribute to your need for financial aid.**

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

Employer Name	Type of Work/ Dates of Employment	Supervisor Name
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**SECTION 7 – POST- SECONDARY FINANCIAL 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**

Name of Parent 1 (father/mother/stepparent) \_\_\_\_\_

Occupation and Employer \_\_\_\_\_

Name of Parent 2 (father/mother/stepparent) \_\_\_\_\_

Occupation and Employer \_\_\_\_\_

**A. If You Are Claimed by Your Parents as A Dependent For Income Tax Purposes, State:**

Parent 1 (father/mother/stepparent) Most Recent Adjusted Gross Income (**IRS Form 1040, Line 11**) \$\_\_\_\_\_

Parent 2 (father/mother/stepparent) Most Recent Adjusted Gross Income (**IRS Form 1040, Line 11**) \$\_\_\_\_\_

# 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 11**) \$\_\_\_\_\_

Spouse's Current Occupation and Employer \_\_\_\_\_

Spouse's Most Recent Adjusted Gross Income (**IRS Form 1040, Line 11**) \$\_\_\_\_\_

# of Family Members \_\_\_\_\_ # Living at Home \_\_\_\_\_ # In College Other Than Yourself \_\_\_\_\_

## SECTION 9 – AUTHORIZATION AND RELEASE

I, \_\_\_\_\_, born on \_\_\_\_\_, \_\_\_\_\_, having filed an application for a 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, and 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 regarding my application for a 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 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 regarding my scholarship application, 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 \_\_\_\_\_  
Signature of Applicant

DATE \_\_\_\_\_

**If parental financial data has been reported in this application, their signature is also required.**

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

DATE \_\_\_\_\_

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

DATE \_\_\_\_\_

## APPLICANT CERTIFICATION

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

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

DATE \_\_\_\_\_