THOUSAND ISLANDS FOUNDATION SCHOLARSHIPS

ELIGIBILITY
Thousand Islands area high school graduates from Alexandria Bay, LaFargeville, Lyme, and TI Central are eligible for assistance for educational opportunities beyond high school. A student must have attended a Thousand Islands area high school for at least one year. He/she must be accepted at an institution of higher education at the time of application. All scholarships will be for one year.

APPLICATION PROCEDURES
Secure an application from the School Counselor Office of Thousand Islands, Alexandria Bay, LaFargeville, or Lyme high school or download the application from the Thousand Islands Foundation website, www.thousandislandsfoundation.org

1. Complete the application and return it to the Clayton address at the top of this page.
2. Provide your educational costs and your means to cover these costs for the coming year.
3. Provide a copy of your letter or documents of acceptance from the indicated institution of higher education.
4. Provide transcripts of your high school and any applicable college grades.
5. If any requested material is not included, the application is considered incomplete and will not be considered.

DEADLINE FOR SUBMISSION OF APPLICATIONS
Application must be completed and received no later than 4 p.m. on Friday, May 8, 2020 at the Thousand Islands Central School District Office. There are no exceptions.

AMOUNT OF GRANTS AND AWARDING
A determination of the amount of any grant shall be made by the Foundation based on available Foundation funds. Recipients will be notified at graduation. Scholarships will be paid to the students at the beginning of the second semester based on successful completion of the first semester as a full time student (completing 12 hours of college credit). Students will be required to provide the Foundation with a copy of their first semester grades before issuance of a check. The student will need at least a 2.0 average on a 4.0 scale for the first semester. The check will be sent to the student at the applicant’s original address unless otherwise directed.

APPLICATION MUST BE RECEIVED BY FRIDAY, MAY 8, 2020
Full Time Freshman Scholarship Application
(For High School Seniors)

Name ______________________________________________________________________________________

Address __________________________________________

___________________________________________

Telephone _____________________________

___________________________________________

Email ____________________________________________

High School _______________________________________

Graduation Date _____________________________

Are you in an early graduation program? Yes _______ No ______

College Attending in Fall _____________________________

Major _________________________________

Expected Graduation Date _____________________________

Degree ________________________________

On a separate sheet of paper please write an essay (typed or computer form) answering both questions in a minimum of 150 words, maximum of 200 words (worth 10 points, with a 2 point bonus for unusual thoughtfulness and creativity):

- Why should the Thousand Islands Foundation invest in your future?
- How will your education help you contribute to the community where you choose to live?

Request the high school from which you will graduate to send an official transcript of your academic record to the Thousand Islands Foundation by Friday, May 8, 2020. Date Requested _______________

Family Members at home or in college (to include mother, fathers, step-parents, guardians, brothers, sisters)

Name | Address | Occupation/Attending College (Name) | Employer

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

APPLICATION MUST BE RECEIVED BY Friday, May 8, 2020
Please be sure to read the “HAVE YOU” page included in this packet.
Describe your work experience during the past 4 years. Indicate dates of employment in each job and approximate number of hours worked each week. List total amounts earned at each job. Employment experience worth 3 points.

<table>
<thead>
<tr>
<th>Position</th>
<th>Date From</th>
<th>Date To</th>
<th>Hours Week</th>
<th>Amount Earned</th>
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If unable to work give explanation.

________________________________________________________________________________________________
________________________________________________________________________________________________
________________________________________________________________________________________________

List all school activities in which you have participated during the past 4 years (e.g. student government, music, sports, etc.). List all community activities in which you have participated without pay during the past 4 years (e.g. Red Cross, church work, volunteer work). Indicate all special awards, honors. School & community activities worth 7 points.

<table>
<thead>
<tr>
<th>Activity</th>
<th>No. of Years</th>
<th>Special Awards, Honors, Community Activities</th>
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If unable to participate state reasons.

________________________________________________________________________________________________
________________________________________________________________________________________________
________________________________________________________________________________________________

Please report any unusual family or personal circumstances you feel warrant attention (use additional pages if needed).

________________________________________________________________________________________________

In submitting this application, 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.

All applicants agree by signing this application that their name and their image can be used by the Thousand Islands Foundation and the Northern New York Community Foundation, and their successors, to advertise and promote the said Foundations in any and all forms.

Applicant’s Signature __________________________________________  Date _________________________

If necessary use separate sheet of paper to complete any of above.
Name of Applicant ________________________________________________

Educational Costs and Your Means to Cover These Costs

Expected annual cost of attending college:

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<tr>
<td>Tuition</td>
<td>$ ________________</td>
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<tr>
<td>Room and Board</td>
<td>$ ________________</td>
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<tr>
<td>Fees</td>
<td>$ ________________</td>
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<tr>
<td>Miscellaneous (books, travel, etc.)</td>
<td>$ ________________</td>
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<tr>
<td>Total</td>
<td>$ ________________</td>
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Scholarships and Grants Awarded

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<tr>
<th>Scholarship</th>
<th>$ ________________</th>
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<tr>
<td>Scholarships</td>
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<tr>
<td>Tuition Assistance Program</td>
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<td>Pell Grant</td>
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<td>Work Study Grant</td>
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TOTAL

$ ________________
The Clayton Volunteer Fire Department awards a Scholarship Annually.

(IF YOU ARE NOT ELIGIBLE, DO NOT RETURN THIS SHEET)

The Candidate for this Scholarship

1. Must be an ACTIVE member of the Clayton Volunteer Fire Department, or son, daughter, grandchild, or spouse of an ACTIVE member.

2. Complete section below and include with your scholarship.

Please complete section:

Do you wish to apply for Clayton Fire Department Scholarship?  
Yes _____  No _____

Name of Active member related to: ________________________________
  Relationship: ________________________________
The Grindstone Island Research and Heritage Center offers two distinctive scholarships with different criteria.

The Traditional “Heritage Scholarship”
1. Candidates must be a direct linear descendent of a full time resident (past or present) of Grindstone Island.
2. Candidates must live within a 35-mile radius of Grindstone Island.
3. Candidates may attend a school outside of the Thousand Islands area.

The “Mary Lou Nunn Rusho Memorial Scholarship”
1. Candidates must be a direct linear descendent of a full time resident (past or present) of Grindstone Island OR the direct linear descendent of a multi-generational summer family.
2. Candidates are NOT required to live within a 35-mile radius of Grindstone Island.
3. Candidates may attend a school outside of the Thousand Islands area.

Do you wish to apply for a (check one)
___________ Heritage Scholarship
___________ Mary Lou Nunn Rusho Scholarship

Name the full time Grindstone Island resident ancestor(s) from whom you are linear descendent or give the name of the multi-generational summer family.

Parent: ____________________________ Date: ____________________________

Grandparent: ______________________ Date: ____________________________

Great Grandparent: _______________ Date: ____________________________

Scholarship winners are requested to attend the annual Grindstone Island Research and Heritage Center picnic to be formally recognized by the Board and Island residents.

INCLUDE THIS FORM WITH YOUR TI FOUNDATION APPLICATION
APPLICANT APPRAISAL

PLEASE RETURN THIS FORM BY FRIDAY, MAY 8, 2020 TO:
THOUSAND ISLANDS FOUNDATION
PO Box 100, Clayton, NY 13624

To be completed by a high school or college counselor, advisor, instructor, or supervisor.

This appraisal is worth a total of 10 points in scoring for our scholarships.
8 points for the assessment and 2 points for your comments.

You have been asked to provide information in support of a scholarship application for

Name of Applicant __________________________________________

ASSESSMENT (8 points)
The applicant’s choice of a post-secondary education program is

___ Extremely appropriate  ___ Very appropriate  ___ Moderately appropriate  ___ Inappropriate

The applicant’s achievements reflect his/her ability

___ Extremely well  ___ Very well  ___ Moderately well  ___ Not well

The applicant’s ability to set realistic and attainable goals

___ Excellent  ___ Good  ___ Fair  ___ Poor

The quality of the applicant’s commitment to school and community

___ Excellent  ___ Good  ___ Fair  ___ Poor

The applicant is able to seek, find, and use learning resources

___ Extremely well  ___ Very well  ___ Moderately well  ___ Not well

The applicant demonstrates curiosity and initiative

___ Extremely well  ___ Very well  ___ Moderately well  ___ Not well

The applicant demonstrates good problem-solving skills, follows through, and completes tasks

___ Extremely well  ___ Very well  ___ Moderately well  ___ Not well

The applicant’s respect for self and others

___ Excellent  ___ Good  ___ Fair  ___ Poor

COMMENTS (2 points)  Use backside of sheet if more space is needed.

____________________________________________________________________________________________________________________________

____________________________________________________________________

Appraiser’s Signature and Title ______________________________________________________________

School/College ________________________________ Telephone Number _________________________
HAVE YOU?

___ 1. Completed the application form?

___ 2. Included your typed essay?

___ 3. Included with your application a statement of your educational costs and your means to cover these costs and a copy of your Financial Awards Letter from your college if you have received it?

___ 4. Included a copy of your letter of acceptance from the institution of higher education?

___ 5. Given the Applicant Appraisal form to someone to complete and return to the Foundation?

___ 6. Asked your Guidance Counselor to send an official transcript of your academic record to the Foundation?

___ 7. Delivered or mailed the fully completed application and attached material to the TICSD, PO Box 100, Clayton, NY 13624 to be received no later than Friday, May 8, 2020.

NOTES: Please submit the materials that you are required to return in the order listed above.

Do NOT put your application in a folder.