



Scholarship Application

Due Date: August 15th

Community Foundation of the Great River Bend
Address: 852 Middle Road, Suite 100, Bettendorf, Iowa 52722
Telephone: (563) 326-2840 Fax: (563) 326-2870 E-Mail: patmiller@cfgrb.org

Quad City Amateur Golf Tour Scholarship

Applicant Information

Name: _____
Last First Middle

Permanent Address: _____
Number & Street

City County State Zip

Date of Birth: _____ Social Security Number _____ / _____ / _____
Month/Date/Year Optional

Telephone Number: _____ Email: _____

Date you began living in our Iowa/Illinois service area on a permanent basis: _____
Month/Year

High School: _____ Graduation Date: _____
School Name Month/Year

Family Information

Name of father/stepfather/guardian: _____

Address: _____
Street City State Zip

Name of mother/stepmother/guardian: _____

Address: _____
Street City State Zip

Spouse's name: _____

Address: _____
Street City State Zip

How many dependent children do your parents have including yourself? _____ Ages _____

How many are in college at present? _____

How many children are living at home full-time? _____

High School Record

A. High School grade point average (GPA) _____

B. Senior Class rank _____

C. Number of students in class _____

D. ACT _____ SAT _____

E. Attach a copy of your high school transcript.

F. Please list in order of preference five colleges to which you have applied. Please note if you have been accepted and/or plan to attend.

1. _____

2. _____

3. _____

4. _____

5. _____

School Activities

In the space below, please list extracurricular activities in which you have participated during the past four years. (Include clubs, debate, school sports, student government, fine arts, etc.)

Activity	Number of Years	Approximate Time Spent Outside Of Class Hrs/Wk Wks/Yr	Leadership Positions, Letters Earned, Awards, Recognition, Etc.

Community & Personal Activities

In the space provided below, please list community, church/synagogue, and personal activities in which you have participated during the past four years. (Include volunteer work, youth programs, athletic programs, music, 4-H, etc.)

Activity	Number of Years	Approximate Time Spent Hrs/Wk Wks/Yr	Leadership Positions, Awards, Honors, Recognition, Etc.

Work Experience

In the space provided below, please list any paid work experience (including self-employment) you have had during the past four years. Include summer employment as well as employment during the school year. Complete this information beginning with your most recent work experience.

Employer	Nature of Work (Include Supervisory Positions)	Dates of Employment	Hrs/Wk
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Golf Experience (if any)

In the space provided below, please list any golf experience you have had during the past four years. Complete this information beginning with your most recent golf experience.

Nature of Golf	Dates of Participation
_____	_____
_____	_____
_____	_____
_____	_____

COLLEGE/UNIVERSITY INFORMATION

Year in college during the coming academic year:

Freshman Sophomore Junior Senior

Will you be a full-time student? _____ Yes _____ No

Major field of study: _____

Anticipated date of college graduation: _____
Month/Year

Aspirations & Goals

Please submit an essay of up to 500 words typed on an attached sheet describing yourself, including personal aspirations, educational, and career goals. This essay should be no longer than one typewritten, double-spaced page. See scholarship criteria on our website (www.cfgrb.org) for additional information required for the scholarship you are applying for. Please report any additional information or factors, which you believe, should be considered in reviewing your application.

References

Please provide 2 written recommendations and fill in the below information on the persons making the recommendations.

Name: _____ Phone: _____ Relationship: _____

Address: _____

Name: _____ Phone: _____ Relationship: _____

Address: _____

Certification

I hereby affirm that the information provided on this form is accurate and complete to the best of my knowledge.

Applicant's Signature

Date

RETURN TO:

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Bettendorf, IA 52722**

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