

# **7-in-1 Scholarship Application Form 2009-2010 Academic Year**

Joan Kolberg Lowen Scholarship (\$4,000)

Davenport Schools Foundation Scholarship (\$1,000)

Class of '59 Scholarship (two \$1,000 awards)

Dr. Lisa Arbisser Scholarship (\$500)

Jane Grady Memorial Scholarship for Academic Excellence (\$5,000)

Davenport Schools Future Educator Scholarship (three \$500 awards)

Marie Linke Powell Scholarship (\$1,000)

Deadline: Due on or before April 8, 2009

Mail to: 7-in-1 Scholarship  
Attn: Norm Bower  
Davenport Schools Foundation  
1606 Brady St.  
Davenport, IA 52803

## **THE JOAN KOLBERG LOWEN SCHOLARSHIP AWARD**

The Joan Kolberg Lowen Scholarship Fund was established in 1996 by the husband and children of Joan Kolberg Lowen to provide an annual scholarship in her memory. The Lowens live in California, but Joan lived in Davenport as a child and always regarded it as her hometown. Since she received most of her early education in Davenport Schools, where she acquired a deep respect for learning, the family chose the Davenport Schools a recipient of the memorial fund.

## **JANE GRADY MEMORIAL SCHOLARSHIP FOR ACADEMIC EXCELLENCE**

Jane Grady, in her will, requested the Davenport Schools Foundation award an annual college scholarship to be known as the Jane Grady Memorial Scholarship for Academic Excellence. The recipient each year is to be a female graduate of Davenport Community School District who has demonstrated a high level of proficiency in English (especially in writing), mathematics, and science. The award is \$1,250 each year for four years as long as the student carries a full-time schedule and maintains at least a 3.00 GPA.

## **MARIE LINKE POWELL SCHOLARSHIP**

The family of Marie Linke Powell established this scholarship in honor of their mother, a highly respected educator, who taught in DCSD for 34 years, including 20 at Fillmore Elementary. Per Mrs. Powell's wishes, the award is given annually to a student majoring in education.

## 7-in-1 Scholarship Application Rules and Instructions

1. Applicants must satisfactorily complete a course of study from a Davenport Community High School.
2. Minimum requirements include an ACT composite of 24 and a GPA (grade point average) of 3.25.
3. Grants will be awarded on an objective and non-discriminatory basis without regard to age, sex, race or religion.
4. Grant awards shall be applied toward tuition, books and fees for one academic year, 2009-2010.
5. Grants must be made for a course of study leading to a Bachelor's Degree at an accredited two - or four-year college or university in the United States.
6. Release of awards scholarship funds must be preceded by proof of enrollment or attendance at the institution proposed in the application.
7. Awards are made on the basis of financial need, academic achievement and such additional criteria as may be deemed appropriate by the Selection Committee.
8. **IMPORTANT:** To be considered for the Kolberg Lowen Scholarship, applicants must file an early financial aid form (FAFSA) and include in item 12 on this application form the resulting Estimated Family Contribution (E.F.C.) number found on the Student Aid Report. Failure to provide this index number will eliminate your application from Kolberg Lowen consideration, but not the other four scholarships. The chosen applicant shall report to the Selection Committee their receipt of any other scholarship awards or grants. The Selection Committee may, at its discretion, withdraw the amount of any scholarship awarded to an applicant when the total resources of the applicants (from other scholarship and grant awards) exceed the estimated annual cost of tuition, room, and board at any of Iowa's state universities. The receipt of large awards such as the Alcoa, Thomas Dooley, Rotary, Hapke or comparable awards will require that the tentative awardee choose between one of the above awards and the Joan Kolberg Lowen Award.
9. All completed applications must be received by the Scholarship Chairman by **April 8, 2009**. Send through your high school counselor or mail directly to:

7-in-1 Scholarship Application  
Attn: Norm Bower  
Davenport Schools Foundation  
1606 Brady St.  
Davenport, IA 52803

### Required information with each application:

1. Completed **Student Application Form**
2. **EFC number** (up to 5 digits) from the Student Aid Report (to be eligible for the Kolberg Lowen Scholarship)
3. **Letter of reference** (if not included with this application, be sure it has been mailed to the Scholarship Chairman at the above address)
4. Official copy of the applicant's **high school transcript**, completed through the first semester of senior year
5. Copy of **ACT results** (also SAT, if available)



13. List financial awards (scholarships or grants) you have already received.

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14. Identify scholarships or other financial assistance for which you have or will apply.

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15. List extracurricular school activities you have engaged in during your high school years; identify the year(s).

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16. List community service and activities you have performed during your high school years; identify the year(s).

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17. Identify any leadership positions you have held in the performance of community service and/or extracurricular activities.

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18. Identify any unusual family or personal circumstances you feel would be helpful information to the Selection Committee.

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19. **On a separate attached sheet**, express in 300 words or less your purpose in going to college, your immediate objectives, and your future goals. Also, list any accomplishments, either in school or outside of school, which have given you the greatest personal satisfaction.

I (we) certify that all answers to the preceding questions are true and correct.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent or Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

## Davenport Schools Foundation Scholarship Letter of Reference

Instructions: Items 1, 2 and 3 should be completed by the applicant. As a courtesy to the people providing a reference for you, please provide a stamped envelope. (See addresses and deadlines below.)

1. Application has been made for \_\_\_\_\_ Scholarship(s).
2. Name of Applicant \_\_\_\_\_  
Last
First
Middle

3. Name of high school and address  
 \_\_\_\_\_  
 \_\_\_\_\_

4. How long and in what capacity have you known this individual?  
 \_\_\_\_\_

5. Please rate the applicant on the following characteristics:

	Excellent	Above Average	Below Average	Average	Unable to Make Determination
Dependability	_____	_____	_____	_____	_____
Motivation	_____	_____	_____	_____	_____
Leadership	_____	_____	_____	_____	_____
Ability to get along with others	_____	_____	_____	_____	_____
Likelihood of academic success	_____	_____	_____	_____	_____

6. Please explain why you feel this individual is (or is not) deserving of a scholarship.

Signature \_\_\_\_\_ Position \_\_\_\_\_  
 Date \_\_\_\_\_

This information will be kept confidential. Return this form to Davenport Schools Foundation, Attn: Norm Bower, 1606 Brady Street, Davenport, IA 52803, prior to April 8, 2009.