

Kiwanis

MISSOURI-ARKANSAS DISTRICT

EARL COLLINS FOUNDATION

\$1,500.00 SCHOLARSHIP APPLICATION FOR HIGH SCHOOL SENIORS

EARL COLLINS FOUNDATION SCHOLARSHIP COMMITTEE MISSOURI ARKANSAS

DISTRICT KIWANIS INTERNATIONAL

DUE BY JANUARY 30, 2026, TO SPONSORING KIWANIS CLUB

(Type or print all information)

Name Of Student _____
(First) (Middle) (Last)

Mailing Address _____
(Street or Box Number)

City _____ State _____ Zip _____

Phone# _____ Cell# _____ Email _____

Name of High School _____

Age _____ Year Graduates _____ Rank (If available) _____ In Class of # _____ (If available)

College Attending _____ Major _____

How many of your siblings will be attending college in the Fall OF 2026? _____

Does your high school have a Key Club? _____ If yes, Number of years (0-4) you were a member _____

List any Key Club offices held _____

Name of Parents(s) or Guardian _____

Mailing Address _____

Phone# _____ Cell# _____ Email _____

Adjusted Gross Income of Parent(s) \$ _____
(Scholarship winners may be asked to submit a copy of IRS 1040, for 2024 before checks will be issued)

I certify that all information is true and correct _____
(Student Applicant)

PLEASE CHECK THAT YOU ARE SUBMITTING THESE ITEMS:

- _____ Completed Earl Collins Scholarship Application
- _____ Transcript Records from high school principal/counselor (ratio of applicant's class rank to class size if available)
- _____ Two letters of recommendation supporting the applicant from faculty members familiar with applicant's work & college plans.
- _____ Volunteerism & Leadership Activities (include Key Club, Key Leader & Kiwanis involvement)-**One 8 1/2 x11 sheet listing activities**
- _____ Education Plans - **One 8 1/2 x 11 sheet** with a statement of your educational plans and goals.
- _____ Honors - **One 8 1/2 x11 sheet** listing honors you're received such as Merit, Valedictorian, Salutatorian, Citizenship awards, etc.

Kiwanis Division# _____
Application Due to (Kiwanis Club) _____
(Sponsoring Kiwanis Club)

Kiwanis Club President _____
(Printed Name)

Address _____ **City** _____ **State** _____ **Zip** _____