



The Michael Wilkinson Foundation **Scholarship Guidelines**

Established in 2016 for the prevention of substance abuse and addiction using discussion, comprehension and confidence building through continued education.

Eight \$2,500 Scholarships available to be awarded to Eight
Arlington Independent School District High School Graduating Seniors

Application for High School Graduates 2019

Deadline to be postmarked: April 15, 2019

The *Michael Wilkinson Foundation Scholarship* will be based on school and community involvement, academic record, financial need, grammatical structure, essay content, and completeness of the application. The Scholarship Committee has established these guidelines in authorizing this scholarship. Only complete applications with accompanying essay, postmarked by the deadline will be considered. All information on this application shall be considered confidential.

Scholarship Checklist and Eligibility

1. The Scholarship will be awarded on a competitive basis to a High School Graduating Senior.
2. The eligible candidate will be required to enroll as a full-time student in an undergraduate degree program for the full academic year for which the Scholarship is awarded. The Scholar will be enrolled for the first time in 2019.
3. Eligible candidate must be a Texas resident, attend Arlington ISD, and must be prepared to present a valid social security card.
4. Each Scholarship will have a value of \$2,500 and is usable for one year.
5. Eligible candidates must apply for this Scholarship using the attached application.
6. Only Scholarship recipients will be formally advised that they have been awarded a Scholarship by June 15, 2019.
7. The Scholarship will be paid directly to the College through Arlington ISD upon verification of enrollment.

Items for Submission – (Staple items together in the following order if mailing. If e-mailing, scan all items as one document, and title Subject Line: Michael Wilkinson Foundation Scholarship Application)

1. Essay Subject: **Schools in the United States today have a growing substance abuse and addiction crisis. Based on your personal knowledge or experiences, how can you affect change with your generation in battling this epidemic?**
 - a. Submit a double-spaced typed essay of at least 500 and no more than 750 words on the essay subject listed above
2. Completed and signed *Michael Wilkinson Foundation Scholarship* Application (2 Pages)
3. One Letter of Recommendation from a teacher, counselor or school administrator
4. One Letter of Recommendation from an employer, minister, neighbor or adult friend over 21 years of age

Mail or email items to:

Michael Wilkinson Foundation Scholarship Application
c/o Wilkinson Group
6031 W. I-20, Suite 242
Arlington, TX 76017
Email: MiWiFS@gmail.com



The Michael Wilkinson **Foundation** **Scholarship Application**

First Name: _____ Last Name: _____ Age: _____

Address: _____ City: _____ State: _____ Zip: _____

Father's Name: _____ Occupation: _____

Address: _____ City: _____ State: _____ Zip: _____

Mother's Name: _____ Occupation: _____

Address: _____ City: _____ State: _____ Zip: _____

With Whom Do You Live: _____

List Siblings Ages at Home

Age _____ Age _____
Age _____ Age _____

College or Vocational School

Age _____ Age _____
Age _____ Age _____

Family Annual Income:

_____ \$0-\$25,000 _____ \$50,001-\$75,000 _____ Over \$100,000
_____ \$25,001-\$50,000 _____ \$75,001-\$100,000

Please provide any information you would like the committee to consider regarding your financial need:

High School Academic Profile:

SAT: Reading _____ Math _____ Writing _____ Total _____ ACT: Composite _____

Number in your class _____ Rank in your class _____ GPA _____

I understand that if I am selected to receive a scholarship, my final approval is contingent upon the completion of my high school requirements prior to August 31 of my graduating year. If I do not meet this requirement, I relinquish any right to the Michael Wilkinson Foundation Scholarship. I also understand that I must be enrolled in college no later than the fall semester following my high school graduation or I forfeit the scholarship.

Signature of Applicant Date

Signature of Parent/Guardian Date

From which Arlington ISD High School will you be graduating? _____

Educational Plans What are your top three choices for college/vocational schools?

1. _____ 2. _____ 3. _____

What are you planning to select as your major course of study? _____

What are your educational and professional goals and objectives? _____

Employment Information

Do you plan to be employed during college? _____ Why or why not? _____

Please list your employment record for the last four years and note if you have worked during the school year or summer break:

<i>Place</i>	<i>Position</i>	<i>School Year/ Summer Break</i>	<i>Date (Month/Year)</i>	<i>Hours Per Week</i>
			From _____ To _____	
			From _____ To _____	
			From _____ To _____	
			From _____ To _____	

High School, Community, Church Organizations and Activities

Please list all organizations and activities (including community service) in which you have been involved for the past four years. Include grade, organization/activity, honor/award and office held.

<i>Grade</i>	<i>Organization/Activity</i>	<i>Honor/Award</i>	<i>Office Held</i>

Hobbies / Extracurricular

Please list your hobbies, outside interests, extracurricular activities, and anything else that you think might influence our decision
