# The Shelly Family Foundation
# Scholarship Initial Application
# 2026

The Shelly Family Foundation awards up to five four-year scholarships each Spring to seniors at Sheridan High School.

Our criteria include, but are not limited to, academic achievement, leadership in the school and community, and financial need. The scholarship is available to students wishing to attend a four-year, two-year, or a trade school program. The foundation will provide $5,000.00 per academic year, (maximum of 4 academic years), as long as you remain in good standing and are enrolled as a full-time student.

Complete the application form and save it as Last Name_First Name_MI_App.pdf. For example, if your name is Jane S. Doe the file should be saved and submitted as:

Doe_Jane_S_App.pdf

We also require a copy of your official high school transcript. Submit your transcript in PDF format and name the file as:

Doe_Jane_S_Trans.pdf

Attach both files and email to:

shellyfamilyfoundation@gmail.com

If you have problems or questions contact your guidance counselor.



APPLICATIONS MUST BE RECEIVED BY FEBRURARY 17TH

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Please Type

| | | | | |
|---|---|---|---|---|
| 1. | Last Name: | | First Name: | |
| 2. | Email Address: | | | |
| 3. | Residence Address: | | | |
| | Street: | | | |
| | City: | | State: | Zip Code: |
| 4. | Telephone Number: | | | |
| 5. | Date of Birth: | Month: | Day: | Year: |
| 6. | I certify that I am a United States Citizen or a permanent resident of the United States of America (check one): YES ☐ NO ☐ | | | |
| 7. | School in which I am enrolled for award semester: | | | |
| | College/University Name: | | | |
| | Campus Name (if applicable): | | | |
| | Address of Financial Aid Office: | | | |
| | Street: | | | |
| | City: | State: | Zip Code: | |
| 8. | Name(s) and address of parents or legal guardians (if under 21): | | | |
| | Name(s): | | | |
| | Street: | | | |
| | City: | State: | Zip Code: | |
| | Telephone Number: | | | |

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| | |
|---|---|
| 9. | List the names and amounts of any other scholarships you will receive per semester or quarter: |
| | |
| 10. | The committee would also like four short writing samples regarding the following:<br>A. A personal biography outlining your unique qualities, interests, passions and goals.<br>B. Scholastic and other achievements that you have accomplished.<br>C. How have you shown leadership during your high school years?<br>D. Any conditions that may exist to indicate a need for you to receive financial assistance for college. Be as specific as possible.<br>Please answer on the individual sheets provided for each item at the end of this application.<br>[600 words maximum for each answer] |
| 11. | Scholarship Checklist<br>A. The following items must be attached to this application in order for the application to qualify for review by the Scholarship Committee.<br>B. Check “YES” or “NO’ to be sure you have attached each item as required. |

| | | | | |
|---|---|---|---|---|
| YES | ☐ | NO | ☐ | This application form, completed and signed. |
| YES | ☐ | NO | ☐ | A copy of your most recent official transcript with cumulative grade point average. |

## STATEMENT OF ACCURACY

I hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge.

| | |
|---|---|
| Signature of scholarship applicant: (may be signed electronically) | |
| Signature(s) of legal guardian(s): (may be signed electronically) | |
| Date: | |

## The Shelly Family Foundation
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## Writing Sample #1
## [600 words maximum]

A personal biography outlining your unique qualities, interests, passions and goals.

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## Writing Sample #2
## [600 words maximum]

Scholastic and other achievements that you have accomplished.

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## Writing Sample #3
## [600 words maximum]

How have you shown leadership during your high school years?

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## Writing Sample #4
## [600 words maximum]

Any conditions that may exist to indicate a need for you to receive financial assistance for college. Be as specific as possible.