



Kansas Geological Foundation

1704 S Baehr St
Wichita, KS 67209
(316) 265-8676

A not-for-profit educational and scientific corporation

Student Scholarship Application

Application Term:

Spring (December 1st Deadline): ___ Fall (May 1st Deadline): ___ Year: ___

NOTE: INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

Please note the required information to be turned in with the application.

- Completed Personal Information (Section I)
- Attached one-page Biographical Sketch to tell of activities & offices held, honors & awards, and work experiences (Section II)
- Required Department Chairman's or Advisor's Recommendation (Section III)

I. PERSONAL INFORMATION:

1. Name of Applicant: _____
2. Date of Birth: _____
3. Gender: Male ___ Female ___
4. Citizenship: U.S. ___ Other ___ If other, specify _____
5. Marital Status: Single ___ Married ___ Widowed ___ Divorced ___ Separated ___
6. Contact Information: Address: _____

City: _____ State: _____
 Zip: _____ Phone: _____

7. Present Student Classification: Junior ___ Senior ___ Graduate Student ___
8. Present University: _____
9. Educational experience (Beginning with high school):

Name of School or College	From	To	Institution Address	Diploma / Degree	Year Obtained

10. What is your intended professional emphasis in the field of geology or earth Science?

11. If you plan to teach, indicate specific level and subjects you wish to teach:

12. Have you previously been a recipient of a KGF Scholarship? Yes ___ No ___

If yes, when? ___ Fall ___ (year) ___ Spring ___ (year)

13. Please attach a separate page to tell of offices held, honors won and work experiences.

14. Parents' Names: _____

15. Parents' Contact Information:

Address: _____ City: _____

State: _____ Zip: _____ Phone: _____

16. Mother's Occupation: _____

Mother's Employer: _____

17. Father's Occupation: _____

Father's Employer: _____

18. Please give a statement of why you think the KGF should sponsor your scholarship:

Applicant's Signature _____ **Date:** _____

Please return completed application to the Kansas Geological Foundation via U.S. Mail at the address listed above.

**** END OF SECTION I ****

Application continued on next page. →

II. BIOGRAPHICAL SKETCH

1. Please use the space provided to describe extracurricular activities which you have participated in, including any leadership positions / offices that you have held, honors and awards you have won, and work experiences. **Biographical Sketch may be provided on a separate page provided it is labeled as such, includes the applicant's name, and is limited to one page.**

**** END OF SECTION II ****

Application continued on next page. →

III. RECOMMENDATIONS

Applicant's Name: _____

Chairman of Department of Geology / Earth Science:

With your personal knowledge of the above named applicant and upon review of the application materials we kindly ask that you provide the KGF Scholarship Committee with your recommendation of this candidate. Your attached signature shall attest to the suitability of the applicant for this award. You may also provide additional comments below, to the same effect.

Chairman's Signature: _____ **Date:** _____

Name of Chairman: _____ **Department:** _____

Additional Comments:

(For Official Use Only)

KGF SCHOLARSHIP COMMITTEE

Member _____ Approve _____ Disapprove _____

Amount: _____ Date: _____

Member _____ Approve _____ Disapprove _____

Amount: _____ Date: _____

COMMENTS: