

THE JOSHUA BENJAMIN COHEN MEMORIAL SCHOLARSHIP

Scholarship Guidelines

1. Up to two scholarships will be awarded annually to graduating seniors of Valparaiso High School who demonstrate a high standard of leadership abilities.
2. Each scholarships will be renewable in the following amounts:

Year One	\$2,000.00
Year Two	1,000.00
Year Three	1,000.00
Year Four	1,000.00
3. This scholarship is designated for tuition, fees, and book expenses.
4. Scholarship checks shall be issued directly to the student's college or university. Proof of enrollment (a copy of the tuition bill) must be provided to the Legacy Foundation before a check will be issued. If the student wishes the funds to be used for book expenses, copies of the receipts must be submitted to the Legacy Foundation.

Scholarship Criteria

1. The award for leadership shall be awarded to a student who demonstrates a high standard of leadership, who has a GPA of 3.0 or better (on a 4.0 scale), an original essay and demonstrated financial need. This scholarship shall not be awarded solely on the basis of leadership.

Criteria for Renewal

1. Renewal of these scholarships is dependent upon the student maintaining a "B" average. If the student's GPA falls below a B average, a probationary period of one term will be allowed. If, after that term, the selection committee determines that significant improvement has been made, the committee may elect to continue the scholarship.
2. Students are required to provide an official copy of their transcript to the Legacy Foundation after each term. Failure to do so may jeopardize their scholarship.
3. Instances of a student temporarily withdrawing from college for circumstances such as serious illness, death in the family, etc. will be reviewed by the selection committee on a case-by-case basis.

Application/Selection Process

1. Application Forms will be made available in the Guidance Office of Valparaiso High School each year.
2. Completed application forms must be returned to the Registrar's Office at Valparaiso High School; copies of the forms will be distributed to the Selection Committee for consideration.
3. The timeline for submitting an application, selection, and announcement of the recipients will be determined each year and publicized through the Guidance Office of Valparaiso High School.
4. The Selection Committee shall be comprised of two (2) members of Joshua Benjamin Cohen's family, a representative appointed by the family, a representative from the Legacy Foundation, and a representative from Valparaiso High School to be appointed by the principal.

Legacy Foundation administers this scholarship. If you have any questions please contact them at 219-736-1880 or email legacy@legacyfoundationlakeco.org

This application is also available online at www.legacyfoundationlakeco.org/scholarships

THE JOSHUA BENJAMIN COHEN MEMORIAL SCHOLARSHIP AWARD FOR LEADERSHIP

INSTRUCTIONS FOR COMPLETING THIS APPLICATION :

1. Please type or print all information using blue or black ink.
2. Complete all questions; additional information may be provided on separate paper.
3. Complete the essay portion of the scholarship on separate paper.
4. Include an official copy of your high transcript with your completed application.
5. Include a copy of your parent/guardian's most recent IRS Form 1040 on which you were claimed as a dependent. (Send pages one and two only. **Do not** send schedules.)

Name _____
(Last) (First) (M.I.)

Address _____
(Street) (City) (Zip Code)

Phone Number _____ Email _____

Father's Name _____ Living Deceased

Father's Address (if different from above) _____

Mother's Name _____ Living Deceased

Mother's Address (if different from above) _____

Number of children in family _____ Number living at home _____

With whom do you live? Both parents Father Stepparent Other
 Mother Relative

List the colleges or universities where you have applied and the status of the application:

Colleges applied to:	Status of application:
	<input type="checkbox"/> pending <input type="checkbox"/> accepted
	<input type="checkbox"/> pending <input type="checkbox"/> accepted
	<input type="checkbox"/> pending <input type="checkbox"/> accepted
	<input type="checkbox"/> pending <input type="checkbox"/> accepted

Anticipated Major Field of Study: _____

Financial Information: Have you (or your parents) filed a FAFSA? Yes No

If you have received the report, what is your Expected Family Contribution: _____

What other sources of support are available for your college education? (eg., support from non-custodial parent, personal savings, income from a trust account, etc.)

Please describe any extenuating circumstances that may affect the Selection Committee's consideration of your financial need. (Use an additional sheet of paper, if necessary.)

List any family member (other than yourself) who will be attending college or vocational school next year:

List work experience, if any:

Place of Employment	Dates of Employment	Job Duties	Name of Supervisor

List extra-curricular activities in which you have participated during high school. Include any honors or special recognition that you have received (use additional paper if needed):

Activity	Year(s) of Participation (9-12)	Positions of Leadership (if any)	Honors or Special Recognition Received

Describe your most outstanding leadership qualities (use additional paper if needed):

ESSAY

On separate paper, please write an original essay. Your essay must be typed and double-spaced and should **not exceed two pages**. Please include your name in the upper right-hand corner of each page.

Please choose one of the following topics about which to write your essay: an important person in your life, a current event about which you feel strongly, a quality or activity that defines you, or an unusual or difficult circumstance that you have overcome.

CERTIFICATION

The Legacy Foundation, Inc., Lake County's Community Foundation, is the administrator of this scholarship. By completing and signing this form, the applicant agrees to the following:

1. I hereby affirm that the information provided on this application is accurate and complete to the best of my knowledge.
2. I have read and understand the information provided on the Guidelines sheet and have had my questions answered satisfactorily by the Legacy Foundation.
3. I understand that this scholarship may only be used for tuition, fees, and book expenses. Checks for tuition and fees will be issued directly to the school. If I choose to use this scholarship for books, I understand that I must contact the Legacy Foundation **before** the beginning of each academic year to receive instructions on disbursement of the funds.
4. I hereby agree to keep the Legacy Foundation apprised each semester of my academic status during college by submitting an official copy of my transcript at the end of each semester.
5. I hereby agree to submit a copy of my tuition bill at the beginning of each academic year.
6. I understand that this scholarship is renewable, but will not extend beyond four years and that renewal is contingent upon my maintaining a 3.0 GPA.
7. The Legacy Foundation, Inc. has my permission to use any general, non-financial information included in this application for publicity purposes.

Please sign and date this application:

Applicant's Signature

Date

PLEASE SUBMIT THE FOLLOWING TO THE REGISTRAR'S OFFICE AT VALPARAISO HIGH SCHOOL:

- YOUR COMPLETED APPLICATION
- YOUR TYPED ORIGINAL ESSAY (Double-spaced, one to two pages in length)
- AN OFFICIAL COPY OF YOUR HIGH SCHOOL TRANSCRIPT
- A COPY OF YOUR PARENT/GUARDIAN'S IRS FORM 1040 (PAGES 1 AND 2 ONLY)

**APPLICATIONS ARE DUE BY MARCH 5, 2010
APPLICATIONS RECEIVED AFTER THAT DATE WILL NOT BE CONSIDERED.**