

**COLLER FOUNDATION**  
**SCHOLARSHIP APPLICATION**

Applications for the Collier Foundation Scholarship are provided to the high schools located in Sanilac and Tuscola Counties. Applications are to be completed and returned to the Collier Foundation on or before May 1<sup>st</sup>.

A student's application for the Collier Foundation Scholarship may be considered, if:

- a. The applicant is a graduate of a high school in Sanilac or Tuscola Counties;
- b. The applicant is a person of good moral character;
- c. The applicant is a citizen of the United States;
- d. The applicant is enrolled or is in the process of enrollment in a private or public college, university or technical school.

Complete this form in ink and print clearly.

**STUDENT INFORMATION**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: Michigan Zip Code: \_\_\_\_\_ Telephone: \_\_\_\_\_

Parent(s) or Guardian(s): \_\_\_\_\_ Average Gross Annual Income: \$ \_\_\_\_\_

Number of children at home older than you: \_\_\_\_\_ Younger than you: \_\_\_\_\_

High School: \_\_\_\_\_

Colleges, universities or technical schools applied to:
_____
_____

Briefly explain why you should be considered for a scholarship and how a scholarship will contribute to your career and education goals:
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

Have you applied for other scholarships: _____ If yes, please list same:
_____
_____
_____

Have you received or will you be receiving other scholarships or financial aid? _____ If yes, please list same and amounts to be received.
_____
_____
_____

**\*\*Please attach transcript of grades and two (2) letters of recommendation to this application. References CANNOT be a relative or a guardian.\*\***

**If a scholarship is awarded, it may apply toward the expenses of the tuition, room and board, fees, books, supplies and any other expense necessary for the pursuance of the applicant's study.**

**The amount of scholarships may not be the same to each student, and will depend upon his or her financial need. Scholarships may be continued from year to year while the applicant is a full time student and may be extended for graduate work.**

**Scholarship may be forfeited immediately upon notification from an authorized official from the institution that the student is no longer attending or is guilty of misconduct or other disqualifying causes.**

**Should a student withdraw as a full time student at any point in the duration of the**

**scholarship, the award shall be automatically voided for continuance of the scholarship.**

**Changes in various aspects and regulations in regard to the Collier Foundation scholarships may be made by the Board of Directors of the foundation. A false material statement on the application shall be grounds for disqualification.**

**By signing this application, I hereby verify the contents of same. Any false or misleading statements shall constitute termination of the scholarship. Further, I agree to submit college transcripts to the Collier Foundation, P. O. Box 311, Sandusky, Michigan 48471, by August 1<sup>st</sup> and February 1<sup>st</sup> of each year that the scholarship is in effect.**

**Dated: \_\_\_\_\_**

\_\_\_\_\_  
**Applicant**

**Parent(s) or Guardian(s) attestation as to average annual gross income.**

**We declare that the information reported on this form, to the best of our knowledge, is true, correct and complete.**

**Dated: \_\_\_\_\_**

\_\_\_\_\_  
**Parent or Guardian**

**Dated: \_\_\_\_\_**

\_\_\_\_\_  
**Parent or Guardian**

**COLLER FOUNDATION SCHOLARSHIP**

**(Personal Reference Form)**

Student's Name: \_\_\_\_\_

Date: \_\_\_\_\_

The above-named student would like to use you as a reference in applying for the Collier Foundation Scholarship. The Foundation is interested in your opinion of this student in regards to character, academic promise, initiative and other attributes which you feel are of importance.

Collier Foundation Board of Directors

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

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Address: \_\_\_\_\_

\_\_\_\_\_