2024 Hayswood Foundation, Inc. Scholarship Programs

Hedges-Barnett Scholarship

Please read carefully and provide the information and attachments as instructed. YOU are ultimately responsible for ensuring that your application is complete, and that all required materials are submitted by the due date.

Answer all questions as completely as possible. If you have questions, contact the Foundation office by sending an email to hfound@att.net (recommended), or by calling (606) 563-9333.

GENERAL ELIGIBILITY REQUIREMENTS: Only members of the current graduating class at Bracken County High School are eligible to apply for first-time receipt. You must be under the age of 25 at the time of initial application. Members of the families of the current directors or staff of Hayswood Foundation, or of the original donor of the scholarship program, are ineligible. Applicants must be planning to attend an accredited college (which may include business or technical colleges, as approved by the Foundation) or university as a full-time student. Scholarships may be applied to undergraduate, graduate, and professional school studies. Enrollment must be as a full-time student, as defined by the guidelines of the institution..

SUBMISSION DEADLINE: Completed applications (the attached 6-page application form plus all of the additional materials required) are to be submitted to either the Counselor's office at Bracken County High School, or to the office of Hayswood Foundation, 135 W. Second Street, P.O. Box 208, Maysville, **no later than 3:00 P.M. Friday, April 19, 2024.**

AWARDS: Scholarships are awarded for one-year periods, and are paid directly to the recipient's school, in substantially equal payments, prior to each term. Past recipients must reapply to retain their scholarships, and will be in competition with applicants in the current graduating class at the High School.

COMMUNITY SERVICE REQUIREMENT: Since this is a community-based scholarship, each recipient selected must complete 10 hours of community service, during the following year, in order to reapply for their scholarship the following college year. Service will be documented on our Community Service Report Form, and the form submitted when it is time for you to renew your scholarship. More information is available on our website, hayswood.org.

CONFIDENTIALITY: To ensure privacy, application materials should be placed in a sealed envelope for submission. If delivering to the Foundation office when we're not open, please place in the drop box outside of our office door.

REQUIRED ATTACHMENTS:

In addition to the application form, provide ALL of the attachments listed, below.

- A) Copy of your high school transcript. If currently in high school, also provide a copy of your student report showing classes taken during this year.
- B) Official college transcript for classes completed (Not needed if classes are on your high school transcript.).
- C) Documentation of ACT score. **OPTIONAL**: If you received a score of 3 or higher on any AP exam, provide a copy of your score(s).
- D) A copy of your senior resume, listing accomplishments and involvements in classroom, extracurricular, and community activities.
- E) Copy of your 2024 FAFSA Submission Summary.
- F) Copy of Pages 1 and 2 of your and your parents' 2023 federal income tax returns.
- G) Two Teacher Recommendation Forms (provided with this application) completed by current or past teachers, and a letter of recommendation from someone other than a teacher who is acquainted with you.
- H) A written statement about your goals in college, and what receiving a scholarship would mean to you.
- I) A photo, that will be used for a news release if you are selected.

2024 Hayswood Foundation, Inc.

Hedges-Barnett Scholarship Application

GENERAL INSTRUCTIONS

- Complete this form by typing, or clearly printing in ink. If you have questions, email hfound@att.net, or call (606) 563-9333.
- Write only on the front of the application sheets, and on the front of any attachments. Information on the back of sheets may be missed when making copies for evaluation. If additional space is needed, indicate on the application that separate sheets are attached, and indicate on attached sheets the section of the application that is being supplemented.
- The applicant's name must appear on all supplemental information attached to or accompanying this application.

Refer back to this application's cover sheet for supplemental information (academic records, senior resume, tax information, Teacher Recommendation Forms, letter of recommendation) which is required in addition to this completed application form.

	INFORMATION ABOUT APPLICAN	IT		
Name:	La	st 4 Digits of Social Secu	ırity No.:	
Principal Address:	Your Email /	Address:		
Parent's email address:	ddress: Home Phone Number.:			
Phone number where you can be reached at c	ollege:			
Date of birth:	Marital status: () single () married	Number of dependent	ts:	
Rank in high school graduating class:	of total graduates			
Current cumulative grade point average:				
Name(s) of parent(s)/guardian(s):				
Principal Address of parent(s)/guardian(s):				
BROTHER OR SISTER'S NAMI	F N	IAME OF SCHOLARSHIP R	ECEIVED	
Will you be the first member of your immediate	e family (parents; siblings) to attend college		No	
Will you be the first member of your immediate College you plan to attend, and its location:	e family (parents; siblings) to attend college	?Yes	No	
Will you be the first member of your immediate College you plan to attend, and its location: Intended course of study:	family (parents; siblings) to attend college	?Yes	No	
Will you be the first member of your immediate College you plan to attend, and its location:	family (parents; siblings) to attend college	?Yes	No	Senior
Will you be the first member of your immediate College you plan to attend, and its location: Intended course of study:	family (parents; siblings) to attend college	?Yes	No No participation:	Senior
Will you be the first member of your immediate College you plan to attend, and its location: Intended course of study:	family (parents; siblings) to attend college	?Yes	No No participation:	Senior
Will you be the first member of your immediate College you plan to attend, and its location: Intended course of study:	family (parents; siblings) to attend college	?Yes	No No participation:	Senior

Applicant's Name:

Stocks and Other Bonds:

Trust Funds:

Real Estate: Vehicles:

	INFORMATION A	ABOUT PARENT(S)/GUARDIAN(S)
With whom do you live? () bo	th parents () father () mother () step father () step mother () other
Please check one of the boxes to	the right if parents are () divorced or () separated.
Are both parents living? ()ye	s ()no	
Father's name:		Father's age:
Father's address (if same as app	licant's, write "same"):	
Name and address of employer:		
Position held:		
Mother's name:		Mother's age:
Mother's address (if same as app	olicant's, write "same"):	
Name and address of employer:		
Position held:		
	AP	PLICANT'S ASSETS
Indicate, below, your assets included real estate, and vehicles.	ling checking and savings	accounts, certificates of deposit, savings bonds, stocks, other bonds, trust funds,
NATURE OF ASSET	VALUE	HOW OBTAINED
Checking and Savings Accounts:	\$	
Certificates of Deposit:	\$	
Savings Bonds:	\$	

Applicant's Name:	2024 Hayswood Hedges-Barne	
APPLICANT'S FINA Itemize, below, your anticipated expenses for attending college during the meal plans, books, and fees related to enrollment or classes (If you are	he full upcoming school year. Includ	de costs of tuition, housing, imates of expenses can be
obtained by contacting your college's financial aid office.). NATURE OF EXPENSE	\$	DOLLAR AMOUNT
	Total Expenses \$	
APPLICANT'S FINANCE List other grants or scholarships for which you have applied (even if you to you for the upcoming school year (indicate the amount you will receiv Seeking other sources of assistance will not lessen your chance of being Foundation office immediately. SOURCE OF ASSISTANCE	have not been notified of receipt), are for the FULL school year). DO NO	OT LIST STUDENT LOANS.
		\$

Total of Other Assistance

Applicant's Name:	

ADDITIONAL FINANCIAL INFORMATION
Other than possible parental assistance, and assets of the applicant listed on Page 3 of this application, list any additional sources of support that are available to the applicant for use toward the cost of education.
support that are available to the applicant for use toward the cost of education.
Explain any circumstances that create a financial hardship which would not be apparent from the information reported elsewhere on this
application.

Applicant's Name:				

FINANCIAL INFORMATION OF PARENTS/GUARDIANS (OR FOR PARENT WITH CUSTODY, IF DIVORCED)

	(OKTOKT AKL	********	COSTODI, II DIVORCED,				
	Actual 2023 Amounts From Federal Income Tax Return			Estimated Amounts for 2024			
Adjusted gross income	\$		Adjusted gross income	\$			
Taxable income	\$		Taxable income	\$			
Tax-exempt interest	\$		Tax-exempt interest	\$			
Income derived from all other sources (including pre-paid living expenses, travel allowances, deferred retirement)	\$		Income derived from all ot sources (including pre-pai expenses, travel allowand deferred retirement)	d living			
ist dependents (other than the applic	ant) for federal inco	_		e divorced, list depend	dents for both.)		
NAME	RELATIONSHIP TO APPLICANT	AGE		AME OF SCHOOL IF ATTENDING	GRADE LEVEL		
			DY PARENT (IF PARENT a written statement to that e				
Actual 2023 Amo Federal Income 1			Estimated	Amounts for 2024			
Adjusted gross income	\$		Adjusted gross income	\$			
Taxable income	\$		Taxable income	\$			
Tax-exempt interest	\$		Tax-exempt interest	\$			
Income derived from all other sources (including pre-paid living expenses, travel allowances,			Income derived from all ot sources (including pre-pai expenses, travel allowanc	d living			
deferred retirement)	\$		deferred retirement)	\$			

Applicant's Name:

CEDTIFICATION 9	AUTHORIZATION BY	

As an applicant for a Hayswood Foundation scholarship, I certify that the information I have provided on this application is correct to the best of my knowledge. I understand that my submission of this application in no way guarantees that funds will be awarded, or the amount of the award should I be selected. If selected, I understand that (1) I may attend the college of my choice, provided the institution is accredited and located within the Commonwealth of Kentucky; (2) all scholarship funds awarded will be paid directly to my college, to be applied toward my expenses under the college's normal procedures for the administration of scholarships; (3) I must submit a copy of my grades to the Foundation at the completion of each semester, as well as evidence of my enrollment for the subsequent semester; (4) the Foundation reserves the right to cancel any scholarship for failure of a recipient to meet academic requirements, or because of a recipient's unlawful conduct; and (5) selection as a recipient for the upcoming school year does not guarantee funding for any subsequent year.

reserves the right to cancel any scholarship for failure of a recipient to meet acac recipient's unlawful conduct; and (5) selection as a recipient for the upcoming scany subsequent year.	hool year does not guarantee funding f
Signature of Applicant	Date
CERTIFICATION BY PARENTS OR GUAR Not necessary for current recipients applying to retain t	_
(If parents are divorced, the signature of the parent with cut- o the best of my/our knowledge, the information reported is complete and accurate	•
Foundation of any major changes in our information, as reported.	
Signature of Parent or Guardian	Date
Signature of Parent or Guardian	Date

Recommendation Letter

It is crucial that the author of your letter of recommendation understands our requirements. To help this process operate as smoothly as possible, write your name on this instruction form and provide it to your letter writer. Remember that you are ultimately responsible for ensuring that your letter is submitted, so remember to follow up with the author to see if his or her letter has been completed and delivered. You may also contact

tne Foundation oπice to inquire.
Scholarship Applicant's Name: You have been selected to write a letter of recommendation for a student who is applying for a 2024-2025 Hedges-Barnett Scholarship offered by Hayswood Foundation, Maysville. To be eligible to write a letter, you must not be a relative of the applicant, or a director or employee of the Foundation. Your letter must be signed and dated, but the date must not be prior to January 1, 2024. Your letter should be no longer than one page, single side, and should indicate how you are familiar with the student Do not give your completed letter to the applicant. Instead, deliver it to the Counselor's office at Bracken County High School, or mail, email, fax, or deliver it directly to the Hayswood Foundation office no later than 3:00 p.m. on Friday, April 19, 2024. A late letter may result in the student's disqualification. Applicants have been made aware that it is their responsibility to contact you soon enough for the letter to be presented on time. If submitting to Hayswood Foundation, email to hfound@att.net, deliver to Hayswood Foundation office, 135 W. Second Street, Suite 1A, Maysville, Kentucky, or mail to us at P.O. Box 208, Maysville, 41056. If by mail, ensure adequate time for delivery. If in person, have an envelope handy to place it in the drop box beside our office door. You may submit letters for several students at one time. If you have questions, please contact the Foundation office by email (recommended) to hfound@att.net. You may also reach us by phone at (606) 563-9333, although our office is not open on a full-time basis. Your time and effort are greatly appreciated.
Teacher Recommendation Forms Two Teacher Recommendation Forms are provided with this application set. Fillable pdf versions are also available separately on our website (hayswood.org). It is crucial that the teachers completing your forms understand our requirements. To help this process operate as smoothly as possible, write your name on these instruction forms and provide them to your form preparers. Remember that you are ultimately responsible for ensuring that your forms are submitted, so remember to follow up with the preparers to see if their forms have been completed and delivered. You may also contact the Foundation office to inquire.
Scholarship Applicant's Name: You have been selected to prepare a Teacher Recommendation Form for a student who is applying for a 2024-2025 Hedges-Barnett Scholarship offered by Hayswood Foundation. To be eligible to submit a form, you must not be a relative of the applicant, or a director or employee of the Foundation. Your form may be completed by hand, or by computer using fillable pdf versions available on our website: hayswood.org. Your form must be signed. Do not give your completed form to the applicant. Instead, deliver it to the Counselor's office at Bracken County High School, or mail, email, fax, or deliver it directly to the Hayswood Foundation office no later than 3:00 p.m. on Friday, April 19, 2024. A late form may result in the student's disqualification. Applicants have been made aware that it is their responsibility to contact you soon enough for the form to be

■ presented on time. If submitting to Hayswood Foundation, email to hfound@att.net, deliver to Hayswood Foundation office, ■ 135 W. Second Street, Suite 1A, Maysville, Kentucky, or mail to us at P.O. Box 208, Maysville, 41056. If by mail, ensure adequate time for delivery. If in person, have an envelope handy to place it in the drop box beside our office door. You may submit letters for several students at one time. If you have questions, please contact the Foundation office by email (recommended) to hfound@att.net. You may also reach us by phone at (606) 563-9333, although our office is not open on a full-time basis. Your time and effort are greatly appreciated.

Scholarship Applicant's Name:		
Ocholarship Applicant's Name.		

You have been selected to prepare a Teacher Recommendation Form for a student who is applying for a 2024-2025 Hedges-Barnett Scholarship offered by Hayswood Foundation. To be eligible to submit a form, you must not be a relative of the applicant, or a director or employee of the Foundation. Your form may be completed by hand, or by computer using fillable pdf versions available on our website: hayswood.org. **Your form must be signed**. Do not give your completed form to the applicant. Instead, deliver it to the Counselor's office at Bracken County High School, or mail, email, fax, or deliver it directly to the Hayswood Foundation office no later than 3:00 p.m. on Friday, April 19, 2024. A late form may result in the student's disqualification. Applicants have been made aware that it is their responsibility to contact you soon enough for the form to be presented on time. If submitting to Hayswood Foundation, email to hfound@att.net, deliver to Hayswood Foundation office, 135 W. Second Street, Suite 1A, Maysville, Kentucky, or mail to us at P.O. Box 208, Maysville, 41056. If by mail, ensure adequate time for delivery. If in person, have an envelope handy to place it in the drop box beside our office door. You may submit letters for several students at one time. If you have questions, please contact the Foundation office by email (recommended) to hfound@att.net. You may also reach us by phone at (606) 563-9333, although our office is not open on a full-time basis. Your time and effort are greatly appreciated.

Hayswood Foundation, Inc. Scholarship Programs **2024 Teacher Recommendation Form**

(Also available on our website, hayswood.org, as a fillable pdf for download.)

When completed, please deliver your form to our office at 135 West Second Street, Suite 1A, Maysville, mail to us at P.O. Box 208, Maysville, or scan and email to hfound@att.net.

Preparer's Name:	Student's Nam	ne:				
Preparer's Signature:	Preparer's Email Address:					
Relationship to Student (check all that apply): Teacher -	Past Curre	nt [Coach	Athlet	ic Directo	r
Please check the number that represents your experience with this student as related to the qualities listed below. A "5" represents the highest score, and a "1" the lowest. Check one number for each quality.						
Participation in class discussions/on-task behavior in class.		1	2	3	4	5
Inquisitiveness; interest in class topics and issues.		1	2	3	4	5
Ability to synthesize and grasp underlying principles.		1	2	3	4	5
Creativity and originality of thought.		1	2	3	4	5
Self discipline, responsibility, and dedication to following thro	ough.	1	2	3	<u>4</u>	5
Motivation, initiative, and self-starting ability.		1	2	3	4	5
Flexibility; willingness to adapt to new situations and accept change.		1	2	3	4	5
Cooperation; social and emotional maturity.		1	2	3	4	5
Academic integrity and honesty.		1	2	3	4	5
Consideration and attitude toward other students.		1	2	3	4	5
Contributing members of the school community.		1	2	3	4	5
Willingness to take academic risks.		1	2	3	4	5
In what subject(s) did you teach the student?						
What are the first words that come to mind to describe	this student?					
If there is information that you believe is important that provide it here.						

Hayswood Foundation, Inc. Scholarship Programs **2024 Teacher Recommendation Form**

(Also available on our website, hayswood.org, as a fillable pdf for download.)

When completed, please deliver your form to our office at 135 West Second Street, Suite 1A, Maysville, mail to us at P.O. Box 208, Maysville, or scan and email to hfound@att.net.

Preparer's Name:	Student's Nam	ne:				
Preparer's Signature:	Preparer's Email Address:					
Relationship to Student (check all that apply): Teacher -	Past Curre	nt [Coach	Athlet	ic Directo	r
Please check the number that represents your experience with this student as related to the qualities listed below. A "5" represents the highest score, and a "1" the lowest. Check one number for each quality.						
Participation in class discussions/on-task behavior in class.		1	2	3	4	5
Inquisitiveness; interest in class topics and issues.		1	2	3	4	5
Ability to synthesize and grasp underlying principles.		1	2	3	4	5
Creativity and originality of thought.		1	2	3	4	5
Self discipline, responsibility, and dedication to following thro	ough.	1	2	3	<u>4</u>	5
Motivation, initiative, and self-starting ability.		1	2	3	4	5
Flexibility; willingness to adapt to new situations and accept change.		1	2	3	4	5
Cooperation; social and emotional maturity.		1	2	3	4	5
Academic integrity and honesty.		1	2	3	4	5
Consideration and attitude toward other students.		1	2	3	4	5
Contributing members of the school community.		1	2	3	4	5
Willingness to take academic risks.		1	2	3	4	5
In what subject(s) did you teach the student?						
What are the first words that come to mind to describe	this student?					
If there is information that you believe is important that provide it here.						

Application Completion Checklist

Review all information on the application for accuracy.
Place your name at the tops of Pages 2 thru 6 of the application, and on each piece of supplemental information accompanying the application form.
Provide working email addresses on Page 1 (You need to monitor your email after submission for messages from us regarding our additional needs, or about application omissions that must be corrected.)
Provide a copy of your senior resume, listing your accomplishments and involvement in school and extracurricular activities.
Provide a written statement of your goals, and what receiving this scholarship would mean to you.
Provide a recent black & white or color photo.
Provide a copy of your high school transcript, and attendance records, including information about classes you are currently taking in high school Provide documentation of your ACT or SAT score.
OPTIONAL: If you scored a 3 or better on any AP exam, provide documentation to support your score(s). (Although optional, supplying proof of score could improve your chance for selection.)
Provide official copies of all college transcripts, if applicable (Not needed if college classes are listed on your high school transcript.).
Provide copies of Pages 1 and 2 of your 2023 federal income tax form, if applicable (Your Social Security number should be concealed prior to submitting.).
Provide copies of Pages 1 and 2 of your parents' 2023 federal income tax return (Social Security numbers should be concealed prior to submitting. If your parents are divorced, we need tax returns from both, or a signed statement from the parent with custody that the information is unavailable, and why.).
Provide a copy of your FAFSA Submission Summary.
If your parents are divorced, and you are not providing an income tax return, and/or financial information requested on Page 5 for the non-custody parent, provide a signed statement from the parent with custody that the information is unavailable, and why (Only one signed statement is required to cover any and all omissions. The absence of any information, even with an explanation, may affect the applicant's chance to receive a scholarship.).
Select two current or past teachers to complete a Teacher Recommendation Form, and a third individual to submit a letter of recommendation. (Follow up with your form & letter preparers to ensure that they are received by the deadline.)
Sign the application near the bottom of Page 6.
Have your parent(s) or guardian(s) sign at the bottom of Page 6 (Not necessary for current recipients applying to retain their scholarships. If your parents are divorced, only the signature of the parent with custody is required.).
Arrange for the delivery of your application form to the Counselor at Bracken County High School, or the office of Hayswood Foundation, along with all other required information, before this year's deadline of 3:00 p.m. on Friday, April 19, 2024.