

Scholarship Application

Dear Neely Scholarship Applicant:

The Otto & Edna Neely Foundation funds scholarships at designated high schools located in the southeast Phoenix metro area for students who want to obtain a college education. The scholarship is in the amount of \$4,000 per academic year (\$2,000 per semester) and is granted to one current high school graduate from each of the participating high schools who meet the qualifications listed below. *The scholarship is for four consecutive years or until the student graduates, whichever is sooner, providing the student continues to be qualified.*

Applicant Qualifications:

- 1 Must be a citizen of the Unites States of America
- 2 Must be a resident of the State of Arizona
- 3 Must have a high school GPA of 2.5 or higher
- 4 Must have a demonstrated financial need
- 5 Must attend an accredited Arizona academic college listed on the Neely Foundation Website, enroll as a full-time student, and complete 12 hours or more each semester in classes toward a degree program
- 6 Must maintain a college semester and cumulative GPA of 2.5 or higher

Application Information:

- 1 Applicants must use the current Neely Foundation scholarship application found on the Neely Foundation website.
- 2 At least three letters of recommendation must be secured from non-relatives: two must be from someone at the high school (principals, teachers, counselors, or coaches), and one from an adult not in any way connected with the high school. The recommendation form must be signed by each recommender and sent directly to your guidance counselor. A recommendation form is included within this application and can be copied as needed or downloaded as a separate pdf at https://neelyfoundation.com/scholarships/ It is the student's responsibility to follow up on recommendations to assure they are received by the deadline. An application is considered incomplete without three recommendations.
- 3 Each section of the application must be completed and returned to your high school guidance counselor by your particular high school's scholarship application deadline. Late or incomplete applications will not be considered.
- 4 Typed applications are required.
- 5 Additional pages may be added for appropriate information or clarity in answering specific questions.

I. Student Information

| Full Name (e.g., John M. Doe) | |
|---|--------|
| Residence Address Address | |
| City, State Zip Code | |
| Mailing Address Same as above | |
| Address | |
| City, State Zip Code | |
| Email | |
| Cell Phone | |
| U.S. Citizen | Yes No |
| AZ Resident | Yes No |
| Where will you live while attending college? | |
| Are you currently employed? | Yes No |
| Length of employment | |
| Number of hours weekly | |
| Employer | |
| Location (city) | |
| Will you be employed while attending college? | Yes No |
| Number of hours weekly | |



II. School Information

| From which high school will you graduate? | |
|--|--------|
| Current high school cumulative GPA as of last completed semester (A=4.0, B=3.0, C=2.0, D=1.0) | |
| Hours of high school classes that will apply to college degree? | |
| Which college will you attend? | |
| College Student ID Number | |
| What is your planned major? | |
| Have you registered for classes? | Yes No |
| How many hours (units) will you take each semester? | |
| Do you plan to attend college for the next four consecutive years? (not including summer sessions) | Yes No |
| If no, why not? | |



III. Activities and Other Information

You may use an additional sheet if necessary.

What community activities are you involved in?

What are your hobbies or interests?

List honors and awards you have received.



IV. Financial Information

Financial information is to be provided by completing a FAFSA form and making it available to your guidance counselor.

How will this scholarship benefit you? Please limit your response to 250 words or less.



V. AFFIDAVIT

I (we) hereby certify that all the above information is true and correct to the best of my (our) knowledge and belief. Upon request, I (we) will provide copies of financial records including income tax returns to verify the information contained in this application. I (we) understand all information submitted by me (us) will be disclosed only to those persons who are involved in the evaluation and selection of scholarship recipients. In addition, I (we) understand the information will be used solely for those purposes.

If I am selected for an Otto & Edna Neely Foundation (herein after referred to as "Foundation") Scholarship, I specifically authorize the college or university I attend to release any and all information concerning my academic performance to the Foundation for the purpose of determining my continued eligibility for the scholarship.

I agree to promptly provide to the Foundation all information requested concerning my academic performance. Further, I agree that I will notify the Foundation promptly of any changes which would affect my eligibility for this award and any changes in my address, contact information, or college or university I attend or plan to attend.

I understand the scholarship is for four consecutive years, or until graduation, whichever is sooner providing I meet Renewal Requirements and remain qualified for this scholarship.

| Signature of Applicant | |
|------------------------------|--|
| Typewritten Name | |
| Date | |
| | |
| Signature of Parent/Guardian | |
| Typewritten Name | |
| Date | |
| | |
| Signature of Parent/Guardian | |
| Typewritten Name | |
| Date | |



Recommendation Form

Please type or print (a separate letterhead may be attached).

| Name of Applicant | |
|-------------------------|---|
| Recommender (check one) | High school principal, teacher, counselor, coach, or other school affiliate |
| | Other non-school affiliated recommender |
| | Please specify |

We request your frank, confidential statement based on your knowledge of the above-referenced applicant. Please indicate your association with the applicant, length of acquaintance, and the reasons you believe he/she would be a worthy candidate for an Otto & Edna Neely Foundation Scholarship. We are interested in specific points such as reliability, potential of success in his/her chosen academic field, motivation and ability that is not necessarily reflected in his/her grades. Information contained in your recommendation will be disclosed only to those persons who are involved in the evaluation and selection of scholarship recipients.

| Signature of Recommender | |
|--------------------------|--|
| Type or Print Name | |
| Date | |
| Address | |
| City, State Zip Code | |

