

The Charles L. Brohan and Loma O. Brohan
and Dorothy V. Brohan
College Scholarship Trust fund

Application Guidelines

1. Applicants must graduate from either Pleasanton High School or Jayhawk-Linn High School in the year of application.
2. The determination for the recipient(s) will be based upon scholastic ability and financial need. The decision(s) of the committee are final.
3. The applicant must be planning to attend a fully accredited community college, college or university beginning in the fall of the year immediately following high school graduation. This includes accredited vocational programs under the direction of the accredited college or university.
4. The applicant must submit a seven semester high school transcript with the application.
5. The applicant must submit to the committee all required documents postmarked on or before April 15th of the year for which the scholarship will be awarded.
6. The applicant must have an accumulated average passing grades (2.0 on 4 point scale).
7. Those who have a financial need will have priority over those of equal academic qualifications but with less financial need.
8. Once the scholarship has been awarded, the award may be renewed for one additional year provided the student has applied by April 15 and maintained at least average passing grades as verified by a college transcript for the previous semester and that the student is in good standing. The amount of the award may vary from the previous year.
9. Mail the following documents on or before **April 15** to the address as follows:
Jayhawk Unified School District #346
Brohan College Scholarship Trust Fund
P.O. Box 278
Mound City, KS 66056

Document Check List

- _____ Application (Student Information page & financial page)
- _____ Transcript (Last seven high school semesters or first college semester)
- _____ Federal Income Tax Form (Photocopy of prior year)
- _____ Student Resume (Optional)

Brohan Scholarship Application

Student Information Page

Student's Full Name:

Student's Address:

City/State/Zip:

Date of Birth:

Telephone Number:

High School:

Date of Graduation:

Total Number Students in Class:

Your rank in the class:

Father/Guardian's Name:

Occupation:

Mother/Guardian's Name:

Occupation:

Community College, College or University you plan to attend:

Proposed Major or Area of Study:

Briefly state your future career plans:

Student's Signature: _____, Date of Application: _____

Brohan Scholarship Application

Financial Information Page

Note: You must attach a photocopy of your parent's prior year federal income tax form.

Father's annual gross income before taxes \$

Mother's annual gross income before taxes \$

Total Adjusted Gross Income (Should match federal form) \$

Number of dependents (exclude mother and father)

Number of dependents attending college

Medical and Dental Expenses not paid by insurance \$

Emergency Expenses not paid by insurance (flood, fire, etc). \$

Total Market Value of Home \$

Amount of unpaid mortgage \$

Do you own a business? Yes No

Do you own a farm? Yes No

Value of other investments (stock, etc.). \$

Briefly explain any special needs or circumstances that the scholarship committee needs to consider:

Father/Guardian's Signature: _____

Mother/Guardian's Signature: _____

Date: _____

Brohan Scholarship

Student Information Page

Student's Full Name:

Student's Address:

City/State/Zip:

Date of Birth:

Telephone Number:

High School:

Date of Graduation:

Total Number Students in Class:

Your Rank in Class:

Father/Guardian's Name:

Occupation:

Mother/Guardian's Name:

Occupation:

Community College, College or University you plan to attend:

Proposed Major or Area of Study:

Briefly state your future career goals:

Student's Signature: _____, Date of Application: _____