



D ' E V E L Y N E D U C A T I O N F O U N D A T I O N

BOB GRAFFENBERGER SCHOLARSHIP

The purpose of this scholarship is to reward the student who has demonstrated strong academic competence at D'Evelyn for at least his/her final three years. This scholarship is available to any qualifying student, although preference will be given to the student who has not received another monetary award for merit.

Scholarship amount: \$500, renewable once for a second year at the same institution.

Requirements (in order of importance):

- Student and his/her family demonstrate financial need.
- Student consistently demonstrates character and citizenship that exemplify D'Evelyn's philosophy and reputation.
- Student has graduating GPA of 3.0 or above AND has not had any academic requirement from the D'Evelyn curriculum waived.
- Student attended D'Evelyn full-time for at least his/her sophomore through senior years.
- Recipient must be enrolled as a full-time student at a college, university or trade school within Colorado.
- Money must be used to help defray cost of tuition/books at a college, university, or trade school.

Submit the following:

1. D'Evelyn Education Foundation Scholarship Application Form with accompanying transcript, resume and goals essay. See the form for specifics.
2. Completed Bob Graffenberger Scholarship Application Form.
3. A copy of the Student's Student Aid Report (SAR) and Expected Family Contribution (EFC) from the Free Application for Federal Student Aid (FAFSA) for the current year.
4. Two or three letters of recommendation, at least one of which is written by a current teacher, supporting that the student consistently demonstrates character and citizenship exemplifying D'Evelyn's philosophy and reputation.
5. Describe any special circumstances of which the selection committee should be aware on a separate sheet of paper.

Student's name _____ Years attending D'Evelyn _____

Address _____ Phone _____

I have been accepted as a full-time student at (name of college, university or trade school)

I verify that, to the best of my knowledge, all information contained in this application and any additional information provided by my family or me is truthful and accurate.

Student's signature _____ Date _____

Parent's or Guardian's Signature _____ Date _____

To be completed by high school counselor: Student's Cumulative GPA _____

I verify that, to the best of my knowledge, all the information contained in this application is correct and student has not had any D'Evelyn academic requirements waived.

Counselor's signature _____ Date _____

Revised November, 2007