



Stanwood-Camano Area Foundation

P.O. Box 1209

Stanwood, WA 98292

(360) 474-7086

**Connecting People Who Care With Causes That Matter**

## **ADULT SCHOLARSHIP APPLICATION INSTRUCTIONS**

The scholarships on the attached pages can all be applied for with a single Scholarship Application Form. Please read eligibility requirements for each scholarship and apply only if you meet those requirements.

### **Minimum Eligibility Requirements:**

In addition to eligibility requirements listed for each individual scholarship, all applicants must meet the following minimum eligibility requirements:

- ☐ Reside within the boundaries of the Stanwood-Camano School District or be a former graduate of either Stanwood High School or Lincoln Hill High School.
- ☐ Have financial need.

### **Forms Required for All Applicants:**

- ☐ Adult Scholarship Application Form.
- ☐ Narrative (see attached Narrative page for instructions).
- ☐ List of scholarships being applied for with certification of eligibility (see attached list).
- ☐ College transcript for any college courses taken in the last five years OR high school transcript if graduated within the last five years (unofficial copy okay).
- ☐ One letter of recommendation from a non-family member, preferably by a work supervisor or instructor.

### **Submission Instructions:**

- ☐ **Applications must be received by 4:00 p.m. on Friday, July 9, 2021.**
- ☐ Place application package in a 9x12 envelope. Do not bind or staple application.
- ☐ **Deliver or mail application package by deadline to:**

Stanwood-Camano Area Foundation  
10101 270th St. NW, Suite 219 (delivery)  
P.O. Box 1209 (mailing)  
Stanwood, WA 98292

**Note: If delivering, please walk up stairs and slip envelope under the SCAF door. Building is open Monday through Friday, 9 a.m. to 5:00 p.m.**

### **For general questions regarding the scholarship process, contact:**

Natalie Hagglund, Scholarship Coordinator  
Stanwood-Camano Area Foundation  
[natalie@s-caf.org](mailto:natalie@s-caf.org)  
360-770-5842



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## ADULT SCHOLARSHIP APPLICATION FORM

Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

Birth Date \_\_\_\_\_ Year high school diploma or GED received \_\_\_\_\_

☐ I live within the boundaries of the Stanwood-Camano School District

☐ I graduated from Stanwood High School or Lincoln Hill High School

Proposed major area of study \_\_\_\_\_

Proposed School or Institution \_\_\_\_\_

### NARRATIVE

Attach a short narrative introducing yourself and explaining what the funds requested would enable you to achieve. Total narrative should be between 1 and 2 double-spaced pages and should address the following:

#### Career Goals:

- Briefly describe your current career goals.
- What is your plan to complete your proposed course of study?
- Where do you see yourself five years after completing your course of study?
- Why should you be selected as a scholarship recipient?
- Briefly describe your need for financial support from the Foundation.

#### College or Vocational School:

- Provide a website link, brochure, or information from another source that describes the course of study to be funded by this scholarship. Include course title, length, and cost.
- How will this course of study help you meet your career goals as stated above?

#### Optional:

- Describe any unusual family, financial or personal circumstances that have affected your ability to continue your education.



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## **NARRATIVE**



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## 2021 ADULT SCHOLARSHIP LISTING

### Cheryle Jett-Boge Memorial Veterinary Scholarship

1-2 scholarships @ \$500

**Eligibility Requirements:** Currently working in a Veterinary Clinic or with animals. Funds to be used for classes, workshops, or further training related to animal care.

☐ I meet eligibility requirements. (Briefly describe eligibility below.)

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### Cheryle Jett-Boge Memorial Fire Sciences Scholarship

1-2 scholarships @ \$500

**Eligibility Requirements:** Currently working at Fire Station or as EMT. Funds to be used for classes, workshops, or further training related to Fire Sciences or EMT.

☐ I meet eligibility requirements. (Briefly describe eligibility below.)

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### Gladys Heintz Memorial

1-2 scholarships @ \$500 to \$1000

**Eligibility Requirements:** Must be 21 years of age or older.

☐ I meet eligibility requirements.

### Hallie Price Visual Arts Scholarship

varies

**Eligibility Requirements:** Demonstrated artistic ability and commitment in the area of visual arts (such as painting, drawing, interior design, landscape architecture, photography, pottery, sculpture, etc.)

**Different Application Required:** Download at [http://s-caf.org/adult\\_scholarships](http://s-caf.org/adult_scholarships)

### Kathy Peebler Caregiver Scholarship

1 scholarship @ \$1,000

**Eligibility Requirements:** Must be 21 years of age or over, pursuing caregiving of elders (including but not limited to nursing, medicine, nurse's aide, and home health care).

☐ I meet eligibility requirements. (Briefly describe eligibility below.)

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**Sarah Margaret Macdonald Nursing Scholarship**

**1 scholarship @ \$4,500**

**Eligibility Requirements:** Must have been accepted into a nursing program at Everett Community College or Skagit Valley Community College.

**Supplemental Forms:** Copy of acceptance letter must be attached.

☐ I meet eligibility requirements. (Briefly describe eligibility below.)

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**Stanwood Democrats / Delores Haglund Jones Memorial Scholarship**

**1 scholarship @ \$1,000**

**Eligibility Requirements:** Must be 21 years of age or over, single parent needing training or education to better compete in today's work force.

☐ I meet eligibility requirements. (Briefly describe eligibility below.)

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**I am applying for and certify that I meet eligibility requirements for the scholarships marked above.**

*I understand that this application becomes valid ONLY when all the required documents are received. In submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge. I understand that falsification of information will result in termination of any award offered.*

*I agree that if I am offered and accept an award, the use of my name, photograph, community, the name and address of my school, and the amount of the award may be used in press releases, public announcements, and other fundraising or promotional materials in all media, to advance the non-profit objectives of the Stanwood-Camano Area Foundation, its affiliates and partnering organizations.*

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date