

## Returning Student Scholarship Application

**If you have earned a prior Bachelors degree, you are not eligible for this scholarship.  
APPLICATIONS MUST BE COMPLETED AND RECEIVED BY THE DEADLINE TO BE CONSIDERED FOR A SCHOLARSHIP.**

**If you leave any section blank you will not be considered for a scholarship.**

Have you previously applied for an ASPIRE scholarship? Yes ☐ No ☐

Were you awarded an ASPIRE scholarship? Yes ☐ No ☐

For what types of costs do you anticipate using the ASPIRE scholarship? \_\_\_\_\_

### Statement of Purpose

The purpose of ASPIRE is to provide supplemental financial assistance to those single parents who are pursuing a course of instruction which will improve their income-earning potential. Scholarships may be used for tuition, books, utility bills, car maintenance, childcare, or any other financial need that contributes to the recipient's success in school.

### Amount of Scholarship

ASPIRE Scholarships are distributed two times a year:

Spring Session: \$750.00

Fall Session: \$750.00

Applicants may reapply for each semester they are attending school but they must fill out a renewal application for each semester a scholarship is sought.

### Deadlines

Spring Session: November 15th

Fall Session: May 15th

### Criteria

Single parents selected for financial assistance will meet the following criteria:

1. Resident of Jasper or Newton county.
2. Single head of household (single, legally separated, divorced, widowed) and not co-habiting with ex, current spouse or partner; with sole custody of one or more children under the age of 21.
3. High School or GED graduate.
4. Income level at no more than 125% of the current U.S. Department of Health and Human Service (HHS) Income Guidelines poverty level.
5. Pursuing a career-oriented course of study (full-time) to ensure a better standard of living for his/her family. **Applicants cannot already have earned an undergraduate degree.**
6. Recipient of a Pell Grant or in the process of applying for a Pell Grant.

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# Scholarship Application

Date of Application

## Personal Information

First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

Last Name \_\_\_\_\_ Maiden Name \_\_\_\_\_

Sex M ☐ F ☐ Date of Birth (mm/dd/yr)       SSN

Martial Status      Single ☐      Married ☐      Divorced ☐  
                          Legally Separated ☐      Widowed ☐      Spouse KIA ☐

Race (Optional)      Native American ☐      Hispanic ☐      Asian ☐  
                          African American ☐      Caucasian ☐      Other ☐

### Mailing Address

Street \_\_\_\_\_ Apartment# \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ County \_\_\_\_\_  
 Email - school \_\_\_\_\_

### Residential Address

Street \_\_\_\_\_ Apartment# \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ County \_\_\_\_\_  
 Email - personal \_\_\_\_\_

### Telephones

Cell         Home

Work         Message

Including yourself, how many individuals are dependent on you for financial help or support?

Do you anticipate any change in Personal/Family Information in the future, e.g., getting married, change in residence, child custody, etc.?      Yes ☐ No ☐

If yes, please explain \_\_\_\_\_

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## Educational information

Are you currently attending college or school full-time? Yes ☐ No ☐

If yes, how many credit hours are you taking this semester? \_\_\_\_\_

What college or school do you now attend or plan to attend? \_\_\_\_\_

What course of study (major)? \_\_\_\_\_

When do you expect to graduate? \_\_\_\_\_

What is your cumulative GPA? \_\_\_\_\_

How are you doing in school? Please give us a status report at this time (courses taken and grades to date). \_\_\_\_\_  
\_\_\_\_\_

## Financial Information

Did you receive an ASPIRE scholarship for the current semester? Yes ☐ No ☐

If no, when did you receive an ASPIRE scholarship? \_\_\_\_\_

What are your anticipated school expenses for the semester in which you are applying?

Tuition and Fees: \$ \_\_\_\_\_ Books and Supplies: \$ \_\_\_\_\_

Have your monthly income or expenses changed since you last applied? Yes ☐ No ☐

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

Are you Pell-eligible? Yes ☐ No ☐

Has your Pell-eligibility changed? Yes ☐ No ☐

For what types of expenses do you anticipate using the ASPIRE scholarship: \_\_\_\_\_  
\_\_\_\_\_

What was your total household income for the past 12 months? \_\_\_\_\_

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## Additional Requirements

**FIRST TIME APPLICANTS** must submit the following supporting documents in addition to this application form. Use this checklist to be sure your application packet is complete.

- Two letters of reference from people (not related to you) who are familiar with your life experiences and with your character.
- A personal statement explaining why you chose this particular course of study and what you hope to achieve. Feel free to include any information about yourself which might be helpful to the Selection Committee in its evaluation.
- A copy of your high school transcript and diploma OR your GED certificate and test scores.
- Official transcripts from any colleges or schools you have previously attended.
- A letter of acceptance/admission from the school of your choice or an official transcript that indicates current enrollment that will be acceptable.

**RENEWAL APPLICANTS** must submit the following supporting documents in addition to this application.

1. An official transcript (Fall Scholarships Only).
2. Upon submission of your application you will receive notification if your application packet is complete. You will only receive one notice if you are missing required items.

**ALL APPLICANTS** will be subject to the following:

1. After the submission deadline, applications will be screened for eligibility. Those applicants eligible for a scholarship will be invited to a personal interview. You will receive a notice telling you the days and times interviews will be conducted. You must call to schedule your interview when you receive this notice.
2. After the interviews, applicants will receive written notification advising them whether they have been awarded a scholarship. If awarded, the letter will specify the date scholarship money will be distributed and the procedure to follow to receive your check. Prior to check distribution each recipient must submit a class schedule for the semester covered by the scholarship and a copy of final grades from the previous semester (if in school). Checks will be distributed twice during the semester. The first check will be sent at the beginning of the semester followed by the remaining funds after midterm grades have been turned in. To receive a fall scholarship, each recipient must submit an official transcript.
3. You **must** sign and date the Memorandum of Understanding on page 6.

## Scholarship Application

The following is **OPTIONAL** but your assistance in these areas increases the ability of ASPIRE to publicize our efforts and to raise money. Please check yes or no to each item and sign at the bottom of the page. Thank you!

I hereby give ASPIRE permission to use information about my background, experiences and academic accomplishments in promotional materials.

Yes, with my name ☐      Yes, but only anonymously ☐      No ☐

I will be willing to assist ASPIRE by speaking at civic clubs, churches, or other engagements in which members of the community want to learn about the activities of ASPIRE.

Yes ☐      No ☐

Applicant's Name (please print)

Applicants Signature

Date

**Submit completed application and attachments to:**

**ASPIRE of Southwest Missouri  
P.O. Box 4623  
Joplin, MO 64803  
Phone 417.291.1640**

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## Scholarship Application

I understand that if I am awarded assistance through ASPIRE, I will abide by the governance of the program for this period of time for which I receive a scholarship.

I hereby certify that the information contained in this application, along with my attachments, is true and correct to the best of my knowledge. I understand the committee has my permission to verify the information given. If additional information or documentation is requested of me, I will be pleased to furnish it.

I also understand the following:

1. This application applies for one semester only and I must reapply each semester to be considered for assistance.
2. Not all applicants who meet eligibility requirements may be awarded a scholarship.
3. If I purposely give false or misleading information, I may be required to repay any funding received.
4. I must meet all eligibility requirements during the semester for which a scholarship is awarded or I will forfeit the scholarship.
5. If I drop out of school for any reason, marry, or move out of the state where my application was made, I lose all rights to remaining awarded funds. I shall be responsible for notifying ASPIRE.
6. Dropping classes, in any given semester, below the award amount, may affect current or future scholarship awards. I shall be responsible for notifying ASPIRE.
7. Purposely falsifying any information required by ASPIRE or making misleading or false statements concerning ASPIRE will result in immediate dismissal from the program.
8. The status of the program funds and/or eligibility requirements may change without notice.
9. I understand that if I miss an interview appointment, I may become ineligible to receive a scholarship.
10. I understand that the Scholarship Committee's decision is final.

If I am not awarded a scholarship or if I should become ineligible to receive a scholarship or any part thereof, I do waive any cause of action that I may have against ASPIRE, its officers, directors, employees or volunteers. I understand that by affixing my signature to this document that ASPIRE, its officers, directors, employees or volunteers will not be liable for any loss that I may suffer by reason of not receiving a scholarship.

I have read and understand the above requirements and by my signature do agree to abide by them.

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Applicant's Name (please print)

Applicants Signature

Date

I hereby give permission for all information related to my academic record and my financial assistance to be released, upon request, to the ASPIRE of Southwest Missouri affiliate. I have read and understand the above requirements and by my signature do agree to abide by them. I agree to participate in follow-up research by ASPIRE after I am no longer receiving scholarships to obtain information about my education and economic status.

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Applicant's Name (please print)

Applicants Signature

Date