



Scholarship Application For Future Leaders Merit Program 2009-2010 Scholarship Year

A. Application Deadlines, Requirements and Criteria

Applications must be **RECEIVED** by the foundation no later than May 31, 2009 unless granted an extension by DCDS. Additionally, faxed applications will not be considered. Please make every effort to submit your application well in advance of the deadline.

Scholarship Recipients will be notified in writing approximately 30 days after the deadline or, if granted an extension, within 30 days of receipt of the application.

Application Requirements:

- 1) A completed and signed application, including the parent/guardian section (pages 1 through 5);
- 2) A recent wallet size photograph (for publicity/identification purposes).

Only completed application packets (including photograph and 2008 tax return) will be accepted for consideration. The Parent Financial Information may be placed in sealed and signed envelopes for confidentiality purposes, but **MUST be included with the application packet. Incomplete application packets will not be considered.**

Scholarship Criteria:

- 1) A student entering grades 6 – 9 during the 2009-2010 school year, with a minimum 3.0 GPA;
- 2) Involvement in school and athletic activities and community service;
- 3) Successful completion of the Detroit Country Day School admission process;
- 4) The ability to pay approximately \$10,000 per year in tuition;
- 5) Must maintain “good citizenship” standards;
- 6) A citizen of the United States.

Please respond to all questions completely and honestly. Print or type clearly. Attach additional sheets as necessary.



B. Personal Information

Last Name First Name Middle Initial Gender Social Security Number

Address City State Zip Code (Area Code) Telephone Number

Date of Birth (Month/Day Year) Country of Citizenship Email Address

Who do you live with permanently? Both Parents ____ Father ____ Mother ____ Legal Guardian ____

Father's Full Name Occupation Employer

Mother's Full Name Occupation Employer

Legal Guardian's Name (If applicable) Occupation Employer

Legal Guardian's Address (If applicable) City State Zip code (Area Code) Telephone Number

Siblings (attach additional sheet if necessary)

Name Age Current School

Name Age Current School

Name Age Current School

Name Age Current School



Parent Financial Information Form
For Future Leaders Merit Program
2009-2010 Scholarship Year

THIS SECTION IS TO BE COMPLETED BY THE PARENT/GUARDIAN OF THE APPLICANT ONLY.

Name of Applicant (Please Print): _____

- Parents' or Guardians' approximate combined income before taxes last year. Include all taxable and nontaxable income. Circle the appropriate lettered answer.

a.	Less than \$10,000	g.	\$60,000 to \$70,000
b.	\$10,000 to \$20,000	h.	\$70,000 to \$80,000
c.	\$20,000 to \$30,000	i.	\$80,000 to \$100,000
d.	\$30,000 to \$40,000	j.	More than \$100,000
e.	\$40,000 to \$50,000	k.	More than \$150,000
f.	\$50,000 to \$60,000	l.	More than \$200,000
- Please attach a separate sheet of paper indicating why you (and your child) desire financial assistance. Although we are not primarily a need-based scholarship, your description can provide valuable insight to the financial situation of your family and/or the applicant.
- Please include a copy of the **first two pages** of your Individual Income Tax Return, Form 1040, for the tax year ending December 31, 2008. **Your social security numbers may be crossed out for security purposes.**

This form and related attachments must be included in the application packet submitted by your child, and **RECEIVED** by the Foundation no later than **May 31, 2009** unless granted an extension by DCDS. Your documents may be placed in a signed and sealed envelope for confidentiality purposes. If you have any questions, please do not hesitate to contact us.

I hereby certify that I am the parent/legal guardian of the above-named applicant. I authorize the Skandalaris Family Foundation to obtain and use all information referred to above. To the best of my knowledge, all of the information contained in this application is true, complete and accurate.

Parent's/Guardian's Signature

Date



F. Additional Information (Attach a separate sheet of paper and answer **two** of the following questions. Write no more than one paragraph for each.)

1. If you could have dinner with anyone, living or deceased, who would it be? Why?
2. What do you feel makes you a unique individual?
3. What quality do you consider most important in a person?

In addition, we encourage you to include one thing that you feel makes you unique (poetry, photography, a newspaper article, etc.) so that we may know you better.

G. Essay

On a separate sheet of paper, write a brief autobiographical statement (no more than two double-spaced pages) detailing your life story, your values, your aspirations and what you believe you could gain from a Detroit Country Day School education.

H. Authorization and Certification

I authorize the officers of the Skandalaris Family Foundation to obtain from my child's school or from any other source, such data as it may require in connection with this application, including, but not limited to, various tests and personal appraisals.

I understand that the photograph, which accompanies this application, will be used for publicity/identification purposes and will not be returned. I know that it is my responsibility to make sure that this picture and all of the official documents which complete my child's application, including letters of recommendation (if any) and my financial information, are to be submitted in one complete packet and RECEIVED by the Skandalaris Family Foundation on or before May 31, 2009 in order for it to be considered by the Foundation for the following school year unless an exception is approved by DCDS.

I hereby certify to the best of my knowledge that the statements in pages 1 through 5 of this application are true, complete, and accurate.

Parent's/Guardian's Signature

Date