Instructions: The Galaway Foundation provides scholarships for students with outstanding academic and leadership potential to attend American or Canadian colleges or universities. Applications are accepted from high school seniors, college freshmen and sophomores. Scholarship funds may be used over one academic year: Fall, Winter, Spring and or Summer term. This form is to be used for your first application to the Galaway Foundation; do not use this form if you are applying to renew a current scholarship. Applications must be submitted at least 60 days before you expect to begin study. Please email Andrew Galaway (info@galawayfoundation.org) to notify him of your intent to apply and the date you expect to begin your college/university study. He will let you know if the Foundation has funds for new applications. To apply, complete and return this application along with requested attachments.

We prefer to receive applications via our website or by email, and request that you scan hard copy application documents and send them as attachments to: info@galawayfoundation.org

1.			
LAST NAME (Family Name)	FIRST NAME (	no nicknames)	MIDDLE NAME
)			
E-MAIL ADDRESS			
_			
3CURRENT MAILING ADDRESS			
CORRENT MATERIO ADDRESS			
CITY	 STATE	POSTAL CODE	COUNTRY (if not U.S.A.)
CITI	31/112	1 03 THE CODE	COONTRY (11 1100 0.33/1.)
1			
PERMANENT MAILING ADDRESS	(if different from Current Ma	iling address)	
CITY	STATE	POSTAL CODE	COUNTRY (if not U.S.A.)
5.			
TELEPHONE NUMBER			
	TC 1 11C4		
5. Citizenship?	If not USA	A, what is your legal s	status in the USA?
		•	d leadership potential. Prefere
	is who meet one or mo ster family (not a relative	_	iteria. Please check all that ap
	, ,	,	<del>-</del>
	-	•	your graduating class?
, ,		•	s community?
J	or recent immigrant to	the United States.	
	le parent family.	£	
Neither of my pa	arents has completed a	tour vear college de	aree.

8.	List below t admission.	he colleges/universities to which you have applied and indicate those that have accepted you for
	Accepted	University Name
9.	What is you	r intended field of study?
10.	Are you pre Yes	sently enrolled in a college/university?  No If yes, what is the college/university?
11.	Have you e	ver been enrolled in any colleges or universities?  No If yes, please list all colleges, dates of enrollment, and reason for leaving:
12.	Month and	year you expect to start college work/ Month Year
13.		uckots
14.	transcripts a transcripts of university p	CORDS. Please include unofficial transcripts with this application. The Foundation requires that official also be forwarded directly from educational institutions to the Galaway Foundation. Please have forwarded from your secondary (or high) school. If you have been (or are) enrolled in a college or lease have all colleges and universities that you have attended forward official transcripts. List below ons from which you have requested transcripts.
15.	completed of How	I SCHOOL PROGRAM (grades 9 through 12). The Foundation gives preference to students who have challenging high school programs that have prepared the students for college.  In many terms of mathematics have you completed?  In many terms of foreign languages have you completed?  In many terms of sciences have you completed?  In many terms of history and geography have you completed?
		w many terms of sociology and psychology have you completed? w many terms of music have you completed?

Please offer any additional information to help the Foundation determine if you completed a challenging high school program:

16.	pot		people who know you well enough to comment about your s not necessary for all referees to comment about both you
		Name:	Email:
		How does this person know you?	
		This person will be able to comment about my	$\square$ academic potential and/or $\square$ leadership potential
		Name: How does this person know you?	Email:
		How does this person know you?	<del></del>
		This person will be able to comment about my	$\square$ academic potential and/or $\square$ leadership potential
		Name	Empile
		Name: How does this person know you?	Email:
		This pages will be able to comment about my	
		This person will be able to comment about my	$\square$ academic potential and/or $\square$ leadership potential
		Name	Finally
		Name: How does this person know you?	Email:
		This person will be able to comment about my	□ <u>academic potential</u> and/or □ <u>leadership potential</u>

- 17. CAREER PLANS. Attach a not to exceed 200 word statement of what you expect to be doing when you complete your education.
- 18. STRENGTHS AND ACCOMPLISHMENTS. Attach a not to exceed 200 word statement to identify your strengths and life accomplishments. Please offer examples.
- 19. CONTRIBUTIONS TO COMMUNITY AND SOCIETY. Attach a not to exceed 200 word statement of how you have contributed to the betterment of your community and society. Please provide examples.
- 20. Please provide any additional information you believe will assist the Foundation to assess both your academic and leadership potential.

I certify that this application, including attachments, is complete, accurate, and correct. I	I understand that incomplete
applications or misrepresentations will disqualify me from consideration for a scholarship of	or may result in the
revocation of any scholarship.	
I also understand that the Calavay Foundation awards scholarching for full time college/u	injugacity study and profess t

I also understand that the Galaway Foundation awards scholarships for full time college/university study and prefers to support students who choose to reside in college/university housing.

Signature:	Date		/
	Month	Day	Year

Please be sure the following attachments are included with your application:

- Household income certification
- Career plans
- Strengths and accomplishments
- Contributions to community and society

#### HOUSEHOLD INCOME CERTIFICATION

Note: This certification is to be completed by the head of	the household.
I certify that the total adjusted gross income reported to	the U.S. Department of Internal Revenue for all members of
our household was for tax yea	ır
Name of student	
Name of student	<del></del>
The total number of persons in our household is	
I will provide copies of our tax returns if requested.	
Cianak wa	Deter
Signature:	Date:/
Relation to student applying for scholarship:	