



Kenny Hoofnagle Scholarship Application

Optimist Club of Solomons



The Optimist Club of Solomons awards a \$2,000 (\$500 per year of attendance) scholarship to provide financial assistance to an eligible applicant for undergraduate study in the field and at a college or university of their choice. Ken Hoofnagle was our club charter president and we award this scholarship in honor of the service and dedication that Mr. Hoofnagle exhibited throughout the years of his service to the youth of Calvert County.

Requirements

Eligible applicants must be residents of Calvert County, Maryland and be either in the current graduating class from Patuxent High School in the Calvert County school system or have completed an accredited homeschool program.

Applicants must be accepted to a college, university or vocational program approved by the Optimist Club of Solomons.

Scholarship funds for ensuing years will be paid during the month of August, directly to the college/university and is pursuant upon the receipt of a certificate of enrollment for the fall semester along with a copy of the student's current transcript. Mail transcript and certificate of enrollment to the address listed below.

Scholarship awards are scheduled for four (4) annual payments of \$500. Any lapse due to temporary/personnel circumstances of up to one-year will be permitted. The award recipient must advise the Optimist Club of Solomons of the need to defer/delay payments. Failure to advise the Optimist Club of Solomons of the need to delay or defer payment may result in forfeiture of future scholarship award payments.

Scholarship award may be suspended or canceled if the student does not maintain a GPA of 3.0 or greater.

Procedures

Complete the Student's Statement of Accuracy and Acknowledgement, the Application form, and the required essay. Mail or email all required forms to the addresses listed below.

Applications will be reviewed and final selections for successful awardees will be made by a committee consisting of members of the Optimist Club of Solomons. If the selected recipient chooses not to utilize the award, an alternate recipient will be chosen by the committee.

Applications will be judged on character, citizenship, scholastic achievements, community service, and financial needs.

Recommendations from various organizations (schools, church, Scout programs, 4H, etc.) will be sought when deemed relative, pertinent, and necessary.

Applications are available on our website (www.SolomonsOptimistClub.org), from the Patuxent High School Guidance Office or by contacting the Optimist Club of Solomons scholarship committee either by mail at PO Box 130, Solomons, Md. 20688 or by phone at 410-326-6266.

Applications **MUST BE RECEIVED** by the scholarship committee **on or before May 10 of the year of graduation. Late applications will not be accepted.** Mail or e-mail completed application, current school transcript and any other required information to either:

Optimist Club of Solomons

c/o Scholarship Committee

PO Box 130

Solomons, Md. 20688

Or email to Candace-m@rocketmail.com or optimistsolomons@gmail.com

Scholarship recipients will be notified of the committee decision via letter in late May / early June.



Optimist Club of Solomons

Kenny Hoofnagle \$2,000 Scholarship



Student's Statement of Accuracy & Acknowledgement

As an applicant for a scholarship from the Optimist Club of Solomons, I hereby affirm that the information provided in this application is accurate and complete to the best of my knowledge. I realize that the Scholarship Committee may verify this information at a later time.

I submit this application with the required essay, transcript, and supporting information. I understand that incomplete applications or applications that do not meet eligibility criteria will not be considered for this scholarship.

I agree that if chosen as a scholarship recipient, I will be invited to a club meeting and that I consent that my photograph may be taken and used to promote the Optimist Club of Solomons Scholarship program. Photo may be waived due to unusual or compelling circumstances.

I understand that if chosen as a scholarship recipient, it is my responsibility to submit to the Optimist Club of Solomons no later than August 1st of each year, a certificate of enrollment for the fall semester and a copy of my current transcript to receive the ensuing year's payments.

Signature of Scholarship Applicant Date

Please type or print your answers on the application. (Use additional sheets if necessary.)

Personal Information

Name (First, Middle Initial, Last) _____

Address _____

E-Mail Address _____

Phone Number _____

High School/Home School Program Attended _____ Guidance Counselor _____

Mother's Name _____ Father's Name _____



Kenny Hoofnagle Memorial Scholarship Application

Optimist Club of Solomons



PLEASE PRINT OR TYPE ALL ENTRIES (Use additional sheets as necessary)

All the following information must be complete; otherwise, the application will be automatically rejected.

Applicant's Full Name: _____ Date of Birth: _____

Address: _____ City, State: _____ Zip Code: _____

Primary Phone # _____ Email Address: _____

Total Number in household: _____ Total annual family income (last tax year): _____

Place a check mark in the small box to the left of the dollar amount that indicates the range of total family income.

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|--------------------------|--------------|--------------------------|-----------------|--------------------------|-----------------|--------------------------|---------------|--------------------------|-----------------|--------------------------|---------|
| <input type="checkbox"/> | \$50k - 100k | <input type="checkbox"/> | \$101k - \$150k | <input type="checkbox"/> | \$151k - \$200k | <input type="checkbox"/> | \$201k - 250k | <input type="checkbox"/> | \$251k - \$300k | <input type="checkbox"/> | >\$300k |
|--------------------------|--------------|--------------------------|-----------------|--------------------------|-----------------|--------------------------|---------------|--------------------------|-----------------|--------------------------|---------|

Number of other dependent children attending: Elementary/Middle School ____ High School ____ College ____

Father's Name: _____ Father's Occupation: _____

Name & Address of Employer: _____

Mother's Name: _____ Mother's Occupation: _____

Name & Address of Employer: _____

Applicant – List jobs held (job title, duties, and reason for leaving job): _____

State the occupation or profession you intend to pursue: _____

Are you a member of an Honor Society? Yes ____ No ____

List school and non-school activities in which you have participated or are currently participating in (include leadership positions held) or attach a copy of your school resume:

Signature of Applicant: _____ Date: _____

Attach the following to this application:

(1) A 300–500-word essay stating your future educational plans and occupational goals and how this scholarship would help you attain these goals, and (2) current high school transcript.

APPLICATIONS ARE HELD IN THE STRICTEST CONFIDENCE.