



## NOVOTNY/OSBORNE SCHOLARSHIP APPLICATION

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### APPLICATION DEADLINE: February 15

**BACKGROUND:** The Novotny/Osborne Scholarship is administered by the Siouxland Community Foundation headquartered in Sioux City, Iowa. This scholarship fund was established in 2001 by Thomas R. and Jeanne K. (Osborne) Novotny, former residents of Sergeant Bluff, Iowa.

**PURPOSE:** The purpose of the scholarship program is to assist graduating Sergeant Bluff-Luton High School seniors in their pursuit of a one, two, three, or four year trade, associate, or academic post-secondary degree.

**ELIGIBILITY CRITERIA:** Applicants must be graduating seniors from Sergeant Bluff-Luton High School located in Sergeant Bluff, Iowa, and have a cumulative GPA of at least 3.0. Recipients may receive other scholarships as long as those scholarships are not based on athletic ability and do not total more than 50% of the Novotny/Osborne Scholarship at time of high school graduation.

**SELECTION CRITERIA:** Selection of recipients is based on such factors as scholastic performance while in high school, ACT/SAT test scores, school and/or community service activities, work history, financial need, essay evaluation, and recommendations.

**SCHOLARSHIP AWARD:** \$18,000 for eight semesters or \$4,500 per year

**APPLICATION PROCEDURE:** Application must be received by the February 15 deadline. *If the deadline falls on a weekend or holiday, the deadline is the first working day after February 15.* Application must include the following:

- Completed application with signature
- Essay
- Two (2) recommendations
- High School Certification Form with official high school transcript

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*Submit your completed application to the Guidance Counselor  
prior to the application deadline.*

*The Guidance Office will deliver all student applications to the  
Siouxland Community Foundation for processing.*

Application questions - Call (712) 293-3303 or e-mail Foundation at [office@siouxlandcommunityfoundation.org](mailto:office@siouxlandcommunityfoundation.org)

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4. Unusual Circumstances: Please report any family and/or personal circumstances/hardships which you think warrant consideration.

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**FINANCIAL INFORMATION**

1. Annual Family Income:  Under \$31,000     \$31,000-\$45,000     \$46,000-\$60,000     \$61,000-\$75,000  
 \$76,000-\$90,000     \$91,000-\$105,000     \$106,000-\$120,000     Over \$120,000

2. Total number of persons within the household (include parents, applicant, other dependents): \_\_\_\_\_

3. Number in household, including applicant, who will attend college **full-time** during upcoming academic year: \_\_\_\_\_

4. Estimate of Anticipated Annual Educational Expenses:		Anticipated Income To Meet Your Educational Expenses:		
		Assured		Requested or Applied for
Tuition & fees	\$ _____	Personal savings	\$ _____	\$ _____
Books & supplies	\$ _____	Family resources	\$ _____	\$ _____
Room & board	\$ _____	College financial aid	\$ _____	\$ _____
Personal expenses	\$ _____	Military educational benefits	\$ _____	\$ _____
Other _____	\$ _____	Outside employment	\$ _____	\$ _____
_____	\$ _____	Other scholarships (please list)		
_____	\$ _____	_____	\$ _____	\$ _____
_____	\$ _____	_____	\$ _____	\$ _____
_____	\$ _____	_____	\$ _____	\$ _____
<b>Total</b>	\$ _____	<b>Total</b>	\$ _____	\$ _____
	=====		=====	=====

**ESSAY**

Please write an essay (not to exceed two typewritten, double-spaced pages) describing your educational plans as they relate to your personal aspirations and career goals in the field of study that you are pursuing. Include motivating factors or experiences which helped shape your personal philosophy and/or your educational plans/career goals. **Applications without an essay will not be considered.**

**LETTERS OF RECOMMENDATION**

Applicants are required to submit **two** recommendations, one from a high school teacher and one from any adult of your choice who is not a family member. Recommendation forms are provided and should be returned along with your application, essay, high school certification form, and official school transcript. The Siouxland Community Foundation must receive all required application materials by the February 15 application deadline. *If the deadline falls on a weekend or holiday, the deadline is the first working day after February 15.*

**CERTIFICATION**

I certify that I am a graduating senior at Sergeant Bluff-Luton High School and that all information provided in this application is true and complete to the best of my knowledge.

Student's Signature \_\_\_\_\_

Date \_\_\_\_\_

***Submit your completed application to the Guidance Counselor prior to the application deadline.***

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**NOVOTNY/OSBORNE SCHOLARSHIP**  
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**HIGH SCHOOL CERTIFICATION FORM**

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**Application Deadline: February 15**

To be completed by the applicant's high school principal or advisor/counselor. All supplementary materials must be securely attached to this form.

1. Name of applicant: \_\_\_\_\_
2. Name of high school: \_\_\_\_\_
3. Entrance date of applicant at this high school: \_\_\_\_\_
4. Applicant will graduate on or about \_\_\_\_\_
5. At the close of the most recent term of the 12th year, the applicant ranked number \_\_\_\_ from the top in a class of \_\_\_\_ (If school policy prohibits release of a specific class rank, indicate percentile ranking in class: \_\_\_\_\_%)
6. At the close of the most recent term of the 12th year, the applicant's cumulative grade point average was \_\_\_\_\_ on a 4.0 scale.
7. **Please attach an official high school transcript to this certification form.**
8. If applicable, applicant's best ACT Score \_\_\_\_\_ SAT Score \_\_\_\_\_ **If the student has taken national achievement tests and scores from these have not been entered on the applicant's official high school transcript, please attach copies of these test scores to the transcript.**
9. In your opinion, has the student been working up to his/her true level of ability? YES \_\_\_\_\_ NO \_\_\_\_\_  
Please comment: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
10. In your judgment, is this applicant adequately prepared for admission to college? YES \_\_\_\_\_ NO \_\_\_\_\_  
If not, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
11. Type of courses taken by the applicant (General, College Preparatory, Health Occupations, etc.): \_\_\_\_\_  
\_\_\_\_\_
12. On the reverse side of this form, please describe the applicant's character, ambition to succeed, academic and leadership abilities. Feel free to add any other information which you feel might assist the selection committee.

Name \_\_\_\_\_

Title \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Telephone ( ) \_\_\_\_\_

Email \_\_\_\_\_

**Please place this completed form with official high school transcript in a sealed envelope and give it to the student for submission with his/her scholarship application.**

**NOVOTNY/OSBORNE SCHOLARSHIP**  
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**APPLICANT RECOMMENDATION FORM**

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**Application Deadline: February 15**

To be completed by a high school teacher or another adult (other than a family member). The person who fills out this form must be different from the person who fills out the High School Certification Form.

1. Name of Applicant: \_\_\_\_\_
2. How long have you known the applicant? \_\_\_\_\_
3. How are you acquainted with this applicant? \_\_\_\_\_
4. Please describe the applicant's character, ambition to succeed, academic and leadership abilities. (May use reverse side)

5. Please add any information which you feel might assist the selection committee. (May use reverse side if necessary)

Name \_\_\_\_\_

Title \_\_\_\_\_

Address \_\_\_\_\_

Telephone ( ) \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

**Please place this completed form in a sealed envelope and give it to the student for submission with his/her scholarship application.**

*Questions may be directed to the Siouxland Community Foundation at (712) 293-3303.*

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**APPLICANT RECOMMENDATION FORM**

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Name \_\_\_\_\_

Title \_\_\_\_\_

Address \_\_\_\_\_

Telephone ( ) \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

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