



Cpl. Christopher Kelly Willis Foundation  
"GREAT REWARDS FOR GREAT WARRIORS"

## Corporal Christopher Kelly Willis Scholarship Fund Scholarship Application

### *How to Apply:*

Students/Parents who would like to apply for the CCKWF Scholarship Fund must review and understand the Statement of Use and *must complete an application and be postmarked by March 2 (for eligibility in the following year)* to be sent to the CCKWF.

Application packet requirements:

- Photo of applicant
- Application form
- Financial statement (including copies of 3 most recent signed Federal Income Tax Returns)
- Certificate of service/dependency
- Scholastic record
- Essay

### *Statement of Use:*

The sole purpose of the CCKWF Scholarship Fund is to honor our soldiers who have made the ultimate sacrifice to ensure our continued freedom by supporting their children in working towards a bright future through higher education. In working towards this purpose the CCKWF reserves the right to help those in financial strain above others. The individual who the Scholarship Fund will be supporting must be the dependent son or daughter of:

- A soldier, sailor, airman, Marine, or Guardsman who was killed or permanently disabled (100% VA disability rating) in the line of duty and who was a permanent resident of Kalamazoo, Van

Buren, Calhoun, or Macomb County at the time of death or disability.

- A soldier, sailor, airman, Marine, or Guardsman who is currently classified as a POW or MIA and was a permanent resident of Kalamazoo, Van Buren, Calhoun, or Macomb County.

Any high school graduate applying must also be registered as a full time (at least 12 credit hours) undergraduate at an accredited college or post high school vocational/technical institution. Please Note that the CCKWF reserves the right to distribute funds elsewhere if these requirements are not fulfilled by the student.

## Requirements Checklists

The following is a detailed checklist of all information needed for your scholarship application packet. Please refer back to this list when preparing and completing your packet. Please call the CCKWF at (269) 492-1040 with any questions.

Please ensure that all information requested is **TYPED OR HANDWRITTEN LEGIBLY**

### 1. Photo of Applicant

Please attach a photo of yourself or your child from the shoulders up. These may be used for publicity if selected to receive the CCKWF Scholarship. Please put your name on the back of photo, and note if you need it returned.

### 2. Signed and completed application form

Complete all of the attached application form. Please do not leave anything blank even if it is contained somewhere in the documents that you enclose with your application. *Fill in "N/A" if information requested is not applicable to you.*

### 3. Financial Statement

Attach **signed** copies of your parents' three (3) most recent Federal Income Tax Returns. If your parents are divorced or separated, the incomes of both parents are required. If you are an independent student, please submit a copy of your most recent Federal Income Tax Return in addition to parents' returns. If you are a parent who is applying for the scholarship fund for your young child your three (3) most recent Federal Income Tax Return must be submitted with application and your

three (3) most recent Federal Income Tax Returns must be submitted upon high school graduation of child (at that time).

**4. Certificate of Service/Dependency**

Please attach a copy of your parents' Certificate of Death (Form DD1300), certificate of disability (proving 100% VA disability rating), or documentation of POW or MIA classification. Also please enclose a photocopy of your current valid dependent's ID card.

**5. Scholastic Record**

Please submit an official transcript from high school and if applicable all post high school educational institutions. Please include this with the application, do not have the school mail it separately. If you are a parent who is applying for your young child, upon high school graduation your child's high school transcripts will need to be submitted.

**6. Essay**

Please type and submit a 500 word essay describing how influential your parent serving in the armed forces was for you. Also please describe how your parent who served inspired you and helped shape your future goals.

***Applicant Information:***

**Personal Information**

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ M.I. \_\_\_\_\_

SSN: \_\_\_\_\_ DOB: \_\_\_\_\_ Sex: M \_\_\_ F \_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_  
(Permanent)

County: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_ Marital Status: Single \_\_\_\_\_  
Married \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_ Separated \_\_\_\_\_  
Divorced \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Do you have any siblings? Yes \_\_\_ No \_\_\_ If yes how many? \_\_\_\_\_

Please list their names and ages below:

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_

**High School Information**

Have you graduated? Yes \_\_\_ No \_\_\_

Name of school: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Year of Anticipated Graduation/GED from high school: \_\_\_\_\_

High school GPA: \_\_\_\_\_ Class rank: \_\_\_\_/\_\_\_\_ ACT Score: \_\_\_\_\_

If you are currently in college, what is your cumulative GPA? \_\_\_\_\_

**College/ University/ Technical School Information (If Applicable)**

College/ School you will attend in the fall: \_\_\_\_\_

City & State of school: \_\_\_\_\_

Credits enrolled in for fall: \_\_\_\_\_ Degree Type (AA,BA,BS): \_\_\_\_\_

Major: \_\_\_\_\_

College grade level you will enter in fall: \_\_\_\_\_

**Other College (If Applicable)**

College, vocational, or technical school(s) previously attended:

School: \_\_\_\_\_ City & State: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ GPA: \_\_\_\_\_

School: \_\_\_\_\_ City & State: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ GPA: \_\_\_\_\_

*(Please enclose transcripts for all schools listed)*

**Extracurricular Activities**

Scholastic Honors/ Distinctions:

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Other Honors/ Awards:

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**Extracurricular activities *in* school:**

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**Extracurricular activities *outside* of school:**

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*(You may attach an additional sheet if not enough space is provided)*

### **Applicants Military Service History**

**Are you currently serving or have you served in the United States Armed Forces?**

I have no prior service: \_\_\_\_\_

I am currently serving: \_\_\_\_\_

If so what Branch: \_\_\_\_\_

Are you on: Active duty: \_\_\_\_\_ Reserve: \_\_\_\_\_ Guard: \_\_\_\_\_

I have prior service: \_\_\_\_\_ (Please enclose DD214 with your application packet)

### **Application History**

**Have you previously applied to the CCKWF Scholarship Fund? \_\_\_\_\_**

**If yes, what year(s) did you apply? \_\_\_\_\_**

**List the names of any family members who have received scholarships from the CCKWF:**

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## Applicant Statement of Expenses and Financial Aid

Please only fill out if next year you will be registered as a full-time (at least 12 credit hours) undergraduate at an accredited college or post high school vocational or technical institution.

Please estimate your next year's academic year expenses and financial aid:

Your estimated academic year expenses for the following:

Tuition	\$_____
Fees	\$_____
Books	\$_____
On/Off Campus Room & Board	\$_____
Personal & Transportation	\$_____
Other _____	\$_____
<b>Total</b>	<b>\$_____</b>

Other grants, awards, scholarships and student loans confirmed, or you expect to receive, for the 2009-2010 academic year:

Pell Grant	\$_____
SEOG	\$_____
State Grant	\$_____
Other Scholarships	\$_____
VA Benefits	\$_____
Other _____	\$_____
<b>Total</b>	<b>\$_____</b>

**Where will you live during the year?**

On campus \_\_\_\_\_ Off Campus \_\_\_\_\_ With Parents \_\_\_\_\_

**Desired Scholarship Amount: \$\_\_\_\_\_**

**What will the scholarship pay for? \_\_\_\_\_**

## **Employment**

**Please only fill out if next year you will be registered as a full-time (at least 12 credit hours) undergraduate at an accredited college or post high school vocational or technical institution.**

**Describe previous employment you have held, what were your job requirements, and how many hours per week did you work:**

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**Describe employment you plan to hold during the academic year? (i.e. your job description, job tasks, how many hours, etc.):**

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***Family Information:***

**Father's Information**

**Last Name:** \_\_\_\_\_ **First:** \_\_\_\_\_ **M.I.:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **DOB:** \_\_\_\_\_

**SSN:** \_\_\_\_\_ **Is your father deceased:** \_\_\_\_\_

**If living, current marital status:** Single \_\_\_\_\_ Married \_\_\_\_\_  
Separated \_\_\_\_\_ Divorced \_\_\_\_\_  
Widowed \_\_\_\_\_

**If father's surname is different than applicant's surname, please explain:**

\_\_\_\_\_

**Father's military service (branch):** \_\_\_\_\_

**Months of active/reserve duty:** \_\_\_\_\_ / \_\_\_\_\_

**Father's highest military rank:** \_\_\_\_\_

**Major units (wings, divisions) where assigned and dates/ location of combat tour(s), units served with in combat:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Type of discharge:** \_\_\_\_\_

**Medals received (list combat "V"):**

\_\_\_\_\_

\_\_\_\_\_

**Please check all that apply:**

**Purple Heart(s)?** \_\_\_\_\_ **POW?** \_\_\_\_\_ **KIA?** \_\_\_\_\_ **MIA?** \_\_\_\_\_

## Mother's Information

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ M.I.: \_\_\_\_\_

Address: \_\_\_\_\_ DOB: \_\_\_\_\_

SSN: \_\_\_\_\_ Is your mother deceased: \_\_\_\_\_

If living, current marital status: Single \_\_\_\_\_ Married \_\_\_\_\_  
Separated \_\_\_\_\_ Divorced \_\_\_\_\_  
Widowed \_\_\_\_\_

If mother's surname is different than applicant's surname, please explain:

\_\_\_\_\_

Mother's military service (branch): \_\_\_\_\_

Months of active/reserve duty: \_\_\_\_\_ / \_\_\_\_\_

Mother's highest military rank: \_\_\_\_\_

Major units (wings, divisions) where assigned and dates/ location of combat tour(s), units served with in combat:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Type of discharge: \_\_\_\_\_

Medals received (list combat "V"):

\_\_\_\_\_

\_\_\_\_\_

Please check all that apply:

Purple Heart(s)? \_\_\_\_\_ POW? \_\_\_\_\_ KIA? \_\_\_\_\_ MIA? \_\_\_\_\_





***Additional Information:***

**Parent's Financial Information**

**Please note that the CCKWF does take into consideration your parents' combined income, and does reserve the right to deny an applicant based on income level. Also remember to attach a copy of your parents' three (3) most recent signed Federal Income Tax Returns. Some information you fill out may be repetitive but please make sure you fully complete the blanks below.**

	<b>Father</b>	<b>Mother</b>	<b>Total</b>
Adjusted Gross Income (from Tax Return)	_____	_____	_____
Tuition Benefits from Employer	_____	_____	_____
Savings or Other Resources	_____	_____	_____
Parental Student Loan(s)	_____	_____	_____
Veteran's Benefits	_____	_____	_____
Number of Depends in College other than Applicant	_____	_____	_____
Total Value of all Assets	_____	_____	_____
Net Worth	_____	_____	_____

**Other Circumstances:**

If there are any additional circumstances such as high medical or dental expenses, other debt, child care, elder care, or other special conditions that should be taken into account by CCKWF please attach a separate sheet containing explanation.

Please note that your application *will not be considered* by the CCKWF if all required documents are not enclosed. Please check off all items that are enclosed.

- \_\_\_\_\_ Photo of applicant
- \_\_\_\_\_ Proof of dependency
- \_\_\_\_\_ Signed copy of all financial forms (including copies of three (3) most recent signed Federal Income Tax Returns)
- \_\_\_\_\_ Certificate of death/disability or proof of POW/MIA status
- \_\_\_\_\_ 500 (+/-) Word Essay
- \_\_\_\_\_ Official transcripts
- \_\_\_\_\_ Tax Returns (as applicable)

**Certification**  
**(Must be signed by applicant and one parent)**

All the information provided in this application is true and complete to the best of our knowledge.

**Applicant's Printed Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Applicant's Signature:** \_\_\_\_\_

**Parent's Printed Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent's Signature:** \_\_\_\_\_