KOHL EXCELLENCE SCHOLARSHIP APPLICATION FORM HERB KOHL EDUCATIONAL FOUNDATION

Co-Sponsored by:

Cooperative Educational Service Agencies Wisconsin Council of Religious and Independent Schools Wisconsin Newspaper Association Wisconsin Department of Public Instruction

INSTRUCTIONS

Student: Completed typed application must be submitted to your principal **no later than Friday, November 4, 2016.**

Principal: Completed application must be submitted to your district administrator **no later than Monday, November 7, 2016**.

Local Selection Committee: The CESA or MPS selection committee **must receive** the application(s) selected at the local level **no later than Wednesday, November 23, 2016.**

NEITHER HERB KOHL NOR ANYONE IN THE KOHL FAMILY PLAYS ANY ROLE OR TAKES ANY PART IN THE EVALUATION AND SELECTION OF THE FINAL CANDIDATES OR RECIPIENTS OF THE KOHL SCHOLARSHIP/FELLOWSHIP PROGRAM.

		GENERAL INFO	ORMATION				
Student's Name Firs	t, Middle Initial, Last				Telephor	ne Are	a/No.
Age	E-mail Address						
Student's Mailing Ad	dress P.O. Box or Street		City		State	ZIP	
School Name				No. of Students i	n Grades	9-12	CESA No.
School Mailing Addre	ess P.O. Box or Street, City, 2	ZIP					

Principal's Name	Principal's Email Address		Telephone Area/No.
Public School District		Address Street, City, ZIP	
Administrator's Name			Telephone Area/No.

WHEN PREPARING APPLICATION, USE FULL NAMES NOT ACRONYMS (e.g., use Future Business Leaders of America, not FBLA)

SIGNATURES

I CERTIFY that the applicant is a student in good standing and demonstrates probable success in postsecondary education.

Signature of High School Principal	Date Signed Mo./Day/Yr.
▶	
Signature of Student	Date Signed Mo./Day/Yr.

A COPY OF THE STUDENT'S TRANSCRIPT MUST BE ATTACHED AS THE FINAL DOCUMENT OF THE COMPLETED NOMINATION PACKAGE (FOLLOWING THE LETTERS OF RECOMMENDATION).

MUSIC AND SPEECH RELATED ACTIVITIES

Indicate the number of years in which you have participated in music- and speech-related activities while in grades 9-12. Limit your response to the space provided.

Orchestra	Activity		Number of Years of Participation
Chamber Instrument(s) played: List Voice: Choir	-		-
Instrument(s) played: List Voice: Choir	Band		
Voice: Choir Solo Theater: Musical Production	Chamber		
Solo Theater: Musical Production	Instrument(s) played:	List	
Solo Theater: Musical Production			
Solo Theater: Musical Production			
Theater: Musical Production	Voice: Choir		
	Solo		
Drama	Theater: Musical Pr	Iuction	
	Drama		
Dance: Specify	Dance: S	cify	
Speech	Speech		
Forensics	Forensics		
Debate	Debate		
Other Activities: Specify	Other Activities: S	cify	

Individual Achievement: List contest awards (for example, regional, conference, or state recognition; team captain) you have received while in grades 9-12. Type your response within the space provided in no less than 11-point font.

Describe the value of participating in these activities to **you** and **others**. Type your response within the space provided in no less than 11-point font.

ATHLETIC ACTIVITIES

Indicate the number of years in which you have participated in the following activities (include interscholastic and intramural activities) while in grades 9-12.

Activity	Number of Years of Participation
Baseball	•
Basketball	
Cheerleading	
Cross Country	
Dance and Poms	
Fencing	
Football	
Golf	
Gymnastics	
Hockey	
Soccer	
Softball	
Swimming	
Tennis	
Track and Field	
Volleyball	
Wrestling	
Other: Specify	

Individual Sport Achievement/Special Recognition: List individual achievements or recognition (for example, conference, regional, sectional, state, team captain) you have received while in grades 9-12. Type your response within the space provided in no less than 11-point font.

Describe the value of participating in these athletic activities to **you** and **others**. Type your response within the space provided in no less than 11-point font.

OTHER SCHOOL AND COMMUNITY ACTIVITIES

List all school activities in which you have participated while in grades 9-12. Indicate the number of years in the appropriate space. In addition, if you have held office(s) in any organization, so indicate along with any special honors, awards, or recognition received. **Activities included on this page are activities not listed on pages 2 and 3.** Limit your response to the space provided.

Activity	Number of Years of Participation	Office Held/Honors/Recognition
List all civic and community activities in which you have partici Does your school require community service for graduation?		12. Limit your response to the space provided.
Activity		Number of Years

Describe the value of participation in these activities to **you** and **others**. Type your response within the space provided in no less than 11-point font.

WORK EXPERIENCE, HOBBIES, OUTSIDE INTERESTS, AND SPECIAL TALENTS

Work Experience (paid or unpaid) while in grades 9-12. Limit your response to the space provided.

What have you learned from your work experience, hobbies, interests, and talents? Type your response within the space provided in no less than 11-point font.

- Write a 300-500 word essay describing your goals in the following:
 - 1. Future education
 - 2. Personal life
 - 3. Community/society service (indicate if school requires community service for graduation.)
 - 4. Career
- Type your name and school at the top of your essay.
- Your essay must be typed in no less than 12-point font and be double spaced with 1" margins on all sides.
- More than 500 words will not be considered part of the application.

LETTERS OF RECOMMENDATION

- Submit three letters of recommendation, one from each of the following categories. These recommendations represent 18 percent
 of the score at the state level.
 - 1. Teacher
 - 2. Counselor or principal
 - 3. Community member (for example, an employer, physician, member of religious community) or family friend (*family members are excluded*) who has never been affiliated with your school district
- All three recommendation letters must be attached to your application. If more than three letters are submitted, they will not be considered part of the application.
- Photocopy the following information and give to each individual who will be writing a letter on your behalf.

Dear Principal, Teacher, Counselor, Community Member, or Family Friend:

- To enhance a student's nomination for a Kohl Excellence Scholarship, it is essential to have specific examples of
 noteworthy improvements, contributions, or successes in an area or areas such as leadership, citizenship, school activity,
 service to the community, and scholarship. Letters of recommendation represent 18 percent of the applicant's score at the
 state level.
- At the beginning of your letter of recommendation, indicate in what capacity you have known the nominee and for what period of time.
- You may also address attributes such as honesty, cooperation, integrity, acceptance of responsibility, positive attitude, initiative, compassion, and entrepreneurship.
- Limit your letter to one page in no less than 12-point font. Additional pages will not be considered part of the application.
- Date and sign the letter of recommendation.

Your letter of recommendation needs to be given to the nominee for inclusion with the total application package.

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Applicant

Insert your name below and attach this sheet to the front of your application before delivering it to your principal. Deliver it to your principal no later than **November 4, 2016.**

Applicant Name:

Principal

The above student is applying for a Herb Kohl Educational Foundation Excellence Scholarship. Please deliver this application to your district administrator by **November 7, 2016**

District Administrator

Deliver the applications you selected from among those submitted to your CESA or MPS selection committee no later than **November 23, 2016.**

Do not send completed applications directly to the Wisconsin Department of Public Instruction or the Herb Kohl Educational Foundation.