JOSEPH J. HOHNER SCHOLARSHIP AND EDUCATIONAL BOARD OF LASALLE COUNTY

119 W. Madison Street, Room 102 Ottawa, IL. 61350 Office Hours: 8:00 a.m. to 4:30 p.m. Monday through Friday

Phone: (815) 434-0780

College or University, Two-Year or Junior College, Trade School, or Graduate School Application Form

Use this application form if you <u>will be attending</u> a college or university, two-year or junior college, trade school, or graduate school in the fall.

Page 1 of 4

The Joseph J. Hohner Scholarship is a gift of the estate of Dr. Joseph J. Hohner of LaSalle County. Dr. Hohner was an Ottawa physician who died in 1972, leaving a half-million dollar special trust, the interest of which funds the scholarship. More than one million dollars has been distributed to over 2,000 students since the scholarship was established. It is a one-year scholarship open only to full-time students who are legal residents of LaSalle County. (Preference is given to Ottawa residents.)

Award selection is based on BOTH need and merit. The amount of the award will vary depending on the funds available from the scholarship investment and on the number of qualified applicants. In the past, the awards have ranged between \$300 and \$1000 per year. The scholarship is not automatically renewable. You must submit a new and COMPLETE application every year. Nothing is carried over from the previous year.

Applicants chosen to receive a Hohner Scholarship will be notified in June.

Applicants wishing to inquire about the status of their application may call our office at 815-434-0780.

To qualify for the Joseph J. Hohner Scholarship, you must be:

- ✓ A FULL-TIME STUDENT (At Least 12 Hours)
- ✓ A LEGAL RESIDENT OF LASALLE COUNTY

You will need to submit ALL of the following items:

- □ APPLICATION FORM, fully completed and <u>SIGNED</u>.
- □ PARENT(S) FEDERAL 1040 or 1040EZ TAX FORM SIGNED

(pages 1 & 2 only) if you are filing as a dependent student (see page 3). (You may obliterate social security and/or tax id numbers)

OR

□ YOUR FEDERAL 1040 or 1040EZ TAX FORM – <u>SIGNED</u>

(pages 1 & 2 only) if you are filing as an independent student (see page 3)

(You may obliterate social security and/or tax id numbers)

- □ **HIGH SCHOOL OR COLLEGE TRANSCRIPTS** Official transcripts are not required, but transcript information should be in a format that shows educational history.
- CURRENT FAFSA.
- ACCEPTANCE LETTER (for beginning or transferring students).
- ✓ **Deadline: April 14, 2017**. All items must be returned to the above address no later than April 14, 2017.
- ✓ All required application materials should be secured together by a single staple and returned at the same time in one envelope.
- ✓ Please be sure to have ADEQUATE POSTAGE on all applications that are mailed. Applications will be returned for insufficient postage.
- ✓ If the above requirements have not been met, this application WILL NOT be considered for an award.

Tips for Completing ANY Scholarship Application:

- Read instructions carefully. Read instructions through completely before starting.
- Gather all necessary materials.
- Allow time to order transcripts or other required items. Plan ahead for vacation dates and holidays when school offices are not open.
- Include everything that is requested. Send only what is requested.
- Be honest
- Be accurate. Check your work. Check your spelling.
- Submit your application as early as possible.
- Respond quickly to any request for additional information.
- Neatness counts! Don't use scrap paper or odd sized paper as part of your application. Don't use the back of something else as part of your application.
- Each person applying for a scholarship must have a <u>separate</u>, COMPLETE, application package.
 (It is not the responsibility of the scholarship committee to research transcripts or make copies for you.)
- Make copies of everything you submit (application form, transcripts, etc.) and keep for your records.

DEADLINE: APRIL 14, 2017 www.roe35.org

JOSEPH J. HOHNER SCHOLARSHIP and EDUCATIONAL BOARD

119 W. Madison St., Room 102

Ottawa, IL 61350

College or University, Two-Year or Junior College, Trade School or Graduate School Application Form

STUDENT INFORMATION (to be completed by student)

Page 2 of 4

Student's Name:Address:			<u> </u>
City:	7IP:	You must be a	legal resident of LASALLE Cou
Date of Birth: Age:	Sex:	— Home	e Phone:
Student's Current School:			
Student's extra-curricular and/or community activi	ties:		
Chudanta wark ayaarianaa			
Student's work experience:			
II and Assembles			
Honors and Awards:			
	qualify you for	a scholarship: (<i>U</i> s	se separate sheet if necessary.)
Honors and Awards: Explain SPECIAL CIRCUMSTANCES which may	qualify you for a	a scholarship: (<i>U</i> s	se separate sheet if necessary.)
	qualify you for a	a scholarship: (<i>U</i> s	se separate sheet if necessary.)
	qualify you for	a scholarship: (<i>U</i> s	se separate sheet if necessary.)
	qualify you for a	a scholarship: (<i>U</i> s	se separate sheet if necessary.)
Explain SPECIAL CIRCUMSTANCES which may	qualify you for	a scholarship: (<i>Us</i>	se separate sheet if necessary.)
Explain SPECIAL CIRCUMSTANCES which may School to be attended in the Fall:	qualify you for	a scholarship: (<i>U</i> s	se separate sheet if necessary.)
Explain SPECIAL CIRCUMSTANCES which may School to be attended in the Fall: Type of school:			
Explain SPECIAL CIRCUMSTANCES which may School to be attended in the Fall: Type of school: Two-year or junior college or trade school	What year	or grade level?:	(13,14,15,etc.)
Explain SPECIAL CIRCUMSTANCES which may School to be attended in the Fall: Type of school:	What year	or grade level?:	
Explain SPECIAL CIRCUMSTANCES which may School to be attended in the Fall: Type of school: Two-year or junior college or trade school	What year What year	or grade level?: or grade level?:	(13,14,15,etc.)
Explain SPECIAL CIRCUMSTANCES which may School to be attended in the Fall: Type of school: Two-year or junior college or trade school Four-year college or university	What year What year	or grade level?: or grade level?:	(13,14,15,etc.) (13,14,15,16,17,18,19,etc.)
Explain SPECIAL CIRCUMSTANCES which may School to be attended in the Fall: Type of school: Two-year or junior college or trade school Four-year college or university Graduate school or law or medical school	What year What year What year	or grade level?: or grade level?: or level?:	(13,14,15,etc.) (13,14,15,16,17,18,19,etc.)

DEADLINE: APRIL 14, 2017

JOSEPH J. HOHNER SCHOLARSHIP AND EDUCATIONAL BOARD OF LASALLE COUNTY

119 W. Madison Street, Room 102 Ottawa, IL. 61350 Office Hours: 8:00 a.m. to 4:30 p.m. Monday through Friday Phone: (815) 434-0780

Financial information: Page 3 of 4

For financial aid purposes, you are a ${f dependent\ student}$ if you can answer ${f NO}$ to ${f ALL}$ of these questions:

- □ Were you born before January 1, 1994?
- □ During the school year 2017-2018, will you be working on a master's or doctorate program?
- □ Are you married?
- Do you have children who receive more than half of their support from you?
- □ Do you have dependents other than your children or spouse?
- ☐ Are you an orphan, or are you or were you (until age 18) a ward/dependent of the court?
- □ Are you a Veteran?

If you are a dependent student, you must provide information about your parents when you apply for this scholarship.

- If your parents are both living and married to each other, answer the questions about them. (You will be providing information about two people.)
- If your parent is widowed or single, answer the questions about that parent. (You will be providing information about one person.) If your widowed parent has remarried as of today, answer the questions about that parent and the person whom your parent married. (You will be providing information about two people.)
- If your parents are divorced or separated, answer the questions about the parent you lived with more during the past 12 months. If you did not live with one parent more than the other, give answers about the parent who provided more financial support during the last 12 months, or during the most recent year that you actually were supported by a parent. (You will be providing information about one person.) If this parent has remarried as of today, answer the questions on the rest of this form about that parent and the person whom your parent married. (You will be providing information about two people.)

For financial aid purposes, you are an **independent student** if you can answer **YES** to **ANY** of these questions:

- □ Were you born before January 1, 1994?
- During the school year 2017-2018, will you be working on a master's or doctorate program?
- □ Are you married?
- Do you have children who receive more than half of their support from you?
- □ Do you have dependents other than your children or spouse?
- Are you an orphan, or are you or were you (until age 18) a ward/dependent of the court?
- □ Are you a Veteran?

If you are an independent student, you must supply information about only yourself, or yourself and your spouse, not your parents.

Page 3 of 4

DEADLINE: APRIL 14, 2017 www.roe35.org

Joseph J. Hohner Scholarship Education Board of LaSalle Co 119 W. Madison St., Room 102 Ottawa, IL 61350

Page 4 of 4

FINANCIAL INFORMATION See information regarding dependent and independent status on page 3. College or University, Two-Year or Junior College, Trade School, or Graduate School

1. Student's Name:			Dependent Student	Independent Student
2. Student's occupation				
3. Student's employer				
4. Work phone				
5. Student's income as lis	sted on W-2(s)			
6. Father/Stepfather's oc	cupation			Not applicable
7. Father/Stepfather's Er	mployer			Not applicable
8. Work phone				Not applicable
9. Father/Stepfather's inc	come as listed on W-2	(s)		Not applicable
10. Mother/Stepmother's	occupation			Not applicable
11. Mother/Stepmother's	Employer			Not applicable
12. Work phone				Not applicable
13. Mother/Stepmother's				Not applicable
		lo Nature of business.		. тот орр тошого
15. Income from other so				
	EZ tax form (signed	copy must be attached)		Not applicable
17. Adjusted gross incom Federal 1040 or 1040	EZ (<u>signed</u> copy mu	st be attached)		
 Will any one else, sue to student's education How much will be rec 	nal expenses? eived this year?	Yes No		
19. Will student be received	• .	•		
financial aid of which How much will be red				
	•	s received this scholarship?		
21. Available savings or i		•		
		ANT and ALL CHILDREN AND		
		nd for whom parent(s) or step-p		sible.
Name of Studen	t Age	School to be attended in the fa	all	Grade or year in school this fall
*NOTE: If you are an INI	DEPENDENT STUDE	<u>INT,</u> list <u>ONLY YOURSELF</u> and	those people for whom YOU	are financially responsible.
I verify the above inf	ormation to be co	rrect.		
Student (Signature requ	ired)		•	
			(Parent(s) signature not	required for Independent student.)
Father (Signature Address (if different from	e required for Depe n student's):	ndent student)		
City:	State	Zip:	Date:	
	e required for Depe	ndent student)	-	
Address (if different from City:	n student's): State	Zi:	Date:	

DEADLINE: April 14, 2017