



The Valentine Braun Irrevocable Education Trust

Part I APPLICANT INFORMATION

Fall Semester, August 2018-December 2018 and Spring Semester, January 2019-May 2019

Please type or print clearly applicable information, sign and submit the enclosed application and applicable enclosures to The Valentine Braun Scholarship's address postmarked or delivered to a courier service that provides tracking on or before the applicable application acceptance period deadline (See the last page of the Scholarship Program Application Instructions for exact dates).

All information must be complete, legible and readable. Illegible information and print smaller than 8 point will not be considered.

For more information see SCHOLARSHIP PROGRAM APPLICATION INSTRUCTIONS.

Legal first, middle and last name

Other names used (Alias, Maiden name, Nickname, Title, Suffix, etc.)

Permanent street address

Permanent city, state, zip code

Daytime phone number

Preferred e-mail address

Cell phone number

Home phone number

Gender _____

You must be 18 years old or older by August 31, 2018 to be eligible for these scholarships.

Date of birth (month, day, year) _____

Age in years as of August 31, 2018 _____

Year in school August 2018-May 2019 (Freshman, etc.) _____

Major _____

Anticipated graduation or completion date _____

You must be enrolled in a degree or degree equivalent program to be eligible for these scholarships.

Type of degree or degree equivalent to be awarded _____

Please list any degree(s) you have previously earned and provide the name and address of the academic institution(s) where they were attained. (No P.O. Box address, please.)

See Kansas Board of Regents website for a list of eligible academic institutions for these scholarships.

Please provide the name and address of the academic institution(s) you have enrolled or plan to enroll in for the Fall Semester, August 2018 - December 2018.

Please provide your **total academic credit hours and total tuition dollar amount per credit hour** for the Fall Semester, August 2018 - December 2018.

<u>Total Academic Credit Hours</u>	<u>Total Tuition Dollar Amount Per Credit Hour</u>
_____	\$ _____ Traditional Undergraduate
_____	\$ _____ Online Undergraduate
_____	\$ _____ Traditional Graduate
_____	\$ _____ Online Graduate

Please provide the name and address of the academic institution(s) you have enrolled or plan to enroll in for the Spring Semester, January 2019 – May 2019.

Please provide your **total academic credit hours and total tuition dollar amount per credit hour** for the Spring Semester, January 2019-May 2019.

<u>Total Academic Credit Hours</u>	<u>Total Tuition Dollar Amount Per Credit Hour</u>
_____	\$ _____ Traditional Undergraduate

_____ \$ _____ Online Undergraduate
_____ \$ _____ Traditional Graduate
_____ \$ _____ Online Graduate

Please put an "X" in front of all that apply as to how you found out about these scholarships.

_____ Word of mouth _____ Social media (Facebook, Twitter)
_____ Academic institution counselor _____ Flyer or printed material at church/school
_____ The Valentine Braun Scholarship (TVBIET) website: www.TVBIET.org
_____ Other, please list. _____

You must be a citizen or a lawful permanent resident of the United States of America, as of December 31, 2017 to be eligible for these scholarships.

Please circle the correct response:

Yes or No Are you a United States of America citizen, as of December 31, 2017?

Yes or No or N/A If you were **not** born in the United States of America, are you a lawful permanent resident of the United States of America, as of December 31, 2017?

Yes or No Are you a resident of the State of Kansas, as of December 31, 2017?

Yes or No Do you have a family or business relationship to any trustee, officer, director, employee or scholarship committee member of The Valentine Braun Irrevocable Education Trust (The Valentine Braun Scholarship)?

Yes or No Did you or your spouse, ancestors, children, grandchildren, great grandchildren, siblings (whether by whole or half blood or step or foster) and the spouses of children, grandchildren, great grandchildren and siblings donate \$5,000 or more to The Valentine Braun Irrevocable Education Trust (The Valentine Braun Scholarship)?

If answered "Yes", please provide the month and year the donation was made.

Yes or No Do you expect to receive or did you receive a **full tuition** scholarship(s) for the **Fall Semester**, August 2018-December 2018 from another source(s)?

If answered “Yes”, please provide the name(s) and the scholarship award dollar amount.

Yes or No Do you expect to receive or did you receive a **full tuition** scholarship(s) for the **Spring Semester**, January 2019-May 2019 from another source(s)?

If answered “Yes”, please provide the name(s) and the scholarship award dollar amount.

Yes or No Do you expect to receive or did you receive a **partial tuition** scholarship(s) for the **Fall Semester**, August 2018-December 2018 from another source(s)?

If answered “Yes”, please provide the name(s) and the scholarship award dollar amount.

Yes or No Do you expect to receive or did you receive a **partial tuition** scholarship(s) for the **Spring Semester**, January 2019-May 2019 from another source(s).

If answered “Yes”, please provide the name(s) and the scholarship award dollar amount.

Yes or No Did you complete, sign and enclose the attached 2018-2019 application? **Prior year forms will not be considered.**

Yes or No Did you complete, sign and enclose the attached 2018-2019 “Confidentiality Agreement for an Applicant” provided with this application? **Prior year forms will not be considered.**

Yes or No Did you complete, sign, date, notarize and enclose all pages of the attached 2018-2019 “Consent Form for Use and Disclosure of Personal Information for the Scholarship Applicant” provided with this application? **Prior year forms will not be considered.**

Hand written essays will not be considered. Only typewritten essays will be considered.

Yes or No Did you enclose with this application a typed essay written by you? The essay is required to include a title, the date written, your signature and at least 200 words but not more than 1,000 words that address the following:

- Why you are an excellent candidate for these scholarships.
- Why you chose your field of study.
- Your future educational plans.

- Your employment opportunities upon graduation or completion of your post-secondary education.
- How your current and/or past work experience(s) have prepared you for your future employment.
- How your activities have prepared you for your future employment.
- How you will use your degree(s) or degree equivalent(s) in the future.

Yes or No Did you enclose your current resume or Curriculum Vitae with this application?

Yes or No Did you enclose your 2018-2019 Free Application For Federal Student Aid “FAFSA” including the Student Aid Report (“SAR”) and data submitted, with this application, even if not applying for Federal Student Aid?

Official high school transcript(s) or equivalent or official GED scores are required for these scholarships. Past recipients of The Valentine Scholarship are required to provide his/her official high school transcript(s) or equivalent or GED transcript from a United States of America academic institution or from a foreign academic institution one time only.

Yes or No or N/A Did you enclose your **official high school transcript(s) or official GED scores**, current as of December 31, 2017 from a **United States of America academic institution**, sealed by them and either directly mailed by them to the Scholarship Committee or enclosed with your application package with this application?
Unofficial transcripts will not be considered.

Yes or No or N/A Did you enclose your most recent **official post-secondary transcript(s)**, current as of December 31, 2017 from a **United States of America academic institution**, sealed by them and either directly mailed by them to the Scholarship Committee or enclosed with your application package with this application?
Unofficial transcripts will not be considered.

High school courses and/or post-secondary courses completed at a foreign academic institution and recorded on official transcripts MUST be translated into English by a qualified licensed interpreter and evaluated by either the Educational Credential Evaluators (“ECE”) or the World Education Services (“WES”). Please include the detailed address of the issuing academic institution for possible verification.

Yes or No or N/A Did you enclose your most recent **official high school or equivalent transcript(s)**, translated into English by a qualified licensed interpreter AND evaluated by either the Educational Credential Evaluators (“ECE”) or the World Education Services (“WES”), current as of December 31, 2017 from a foreign **academic institution** with this application?
Unofficial transcripts will not be considered.

Yes or No or N/A Did you enclose your most recent **official post-secondary transcript(s)**, translated into English by a qualified licensed interpreter AND evaluated by

either the Educational Credential Evaluators (“ECE”) or the World Education Services (“WES”), current as of December 31, 2017 from a foreign **academic institution** with this application?

Unofficial transcripts will not be considered.

Yes or No Did you enclose a copy of your official score report from your SAT, ACT, GRE, LSAT, GMAT, MCAT, PCAT, TEAS and/or other required entrance test(s) for your field of study with this application?

Yes or No Did you enclose written documentation containing the projected cost of your tuition for the Fall Semester, August 2018-December 2018 and/or for the Spring Semester, January 2019-May 2019 with this application? Acceptable examples include a clearly identifiable print out from your academic institution’s website or a clearly identifiable photocopy of the tuition page from your academic institution’s catalog or handbook.

Yes or No or N/A Did you enclose your most current recommendation letter(s) written, signed and dated from your work supervisor(s) with this application? **Recommendation letters without an authorized signature and date will not be considered.**

Yes or No or N/A Did you enclose your most current recommendation letter(s) written, signed and dated from your current or former high school or post-secondary academic institution teacher(s) with this application? **Recommendation letters without an authorized signature and date will not be considered.**

Yes or No or N/A Did you enclose proof of your extracurricular activities, award(s), recognition, leadership position(s), membership(s), military service or community service during the previous five years with this application?

Finalists may be interviewed at the discretion of the Scholarship Committee. Please circle one of the following interview choices preferred by you. The final interview method will be determined by the Scholarship Committee.

-In person

-By phone (your preferred telephone number) _____

Part II FINANCIAL NEED

Fall Semester, August 2018-December 2018 and Spring Semester, January 2019-May 2019

Please circle the correct response:

Yes or No Are you currently employed? If yes, please provide the name and address of your employer. _____

If yes, please provide the first and last name of your current work supervisor.

If yes, please provide your current supervisor’s work phone number.

If yes, please provide the number of hours per week you typically work at the above employer.

Yes or No Does your employer provide partial or full tuition for its employees? If yes, please provide the dollar amount you will receive for the Fall Semester, August 2018-December 2018 and/or the Spring Semester, January 2019-May 2019.)

Please provide how your tuition will be paid for the Fall Semester, August 2018-December 2018 and/or the Spring Semester, January 2019-May 2019. Please provide the dollar amount from each source. (Grant(s), loan(s), tuition scholarship(s) from other sources, room and board scholarship(s), athletic scholarship(s), award(s), etc.)

Please provide your estimated educational expenses for the Fall Semester, August 2018-December 2018 and/or the Spring Semester, January 2019-May 2019.

\$ _____ Tuition \$ _____ Books

\$ _____ Fees \$ _____ Room and Board

\$ _____ Other (Please provide any other costs that you anticipate.)

Part III ACADEMIC MERIT

Fall Semester, August 2018-December 2018 and Spring Semester, January 2019-May 2019

- _____ High School Grade Point Average (“GPA”)
- _____ General Educational Development (“GED”) scores
- _____ Post-Secondary **Undergraduate** Education Grade Point Average (“GPA”)
- _____ Post-Secondary **Graduate** Education Grade Point Average (“GPA”)
- _____ Post-Secondary Grade Point Average (“GPA”), in degree-related classes
- _____ American College Testing (“ACT”) scores
- _____ Scholastic Aptitude Test (“SAT”) scores
- _____ Master’s test scores from (circle correct one):
 - GMAT (Graduate Management Admission Test”
 - GRE (“Graduate Record Examination”)
 - LSAT (“Law School Admission Test”)
 - MCAT (“Medical College Admission Test”)
 - PCAT (“Pharmacy College Admission Test”)
 - TEAS (Test of Essential Academic Skills for nursing)
 - _____ other required entrance test(s) for your field of study

Please provide your extracurricular activities using **complete names** instead of acronyms, during the **previous five years**, including but not limited to:

Art, performing arts, athletics, award(s), broadcasting, creative writing, band, choir, music, debate, forensics, military service, political activities, religious activities, leadership position(s), recognition, membership(s), club(s), civic or professional organization(s), community service, volunteer activities, etc.

<u>Name of Extracurricular activity</u>	<u>Year(s)</u>	<u>Approximate hours per week</u>

Part IV RELIGIOUS INFORMATION

Fall Semester, August 2018-December 2018 and Spring Semester, January 2019-May 2019

Please circle the correct response:

Yes or No Are you a member of Saints Peter and Paul Orthodox Christian Church, Inc. in Topeka, Kansas as of December 31, 2017?

Yes or No Are you a member of an Orthodox Christian Church (excluding Saints Peter and Paul Orthodox Christian Church, Inc. located in Topeka, Kansas), where the church building resides in the State of Kansas and the church is a member of the Assembly of Canonical Orthodox Bishops of North and Central America or its successor, as of December 31, 2017? If yes, please provide the name and mailing address of this church.

If yes, please provide the first and last name of the Orthodox Christian priest, who serves at the church, where you are a member, as of December 31, 2017.

Yes or No or N/A Did you enclose a 2018-2019 Parish Priest Applicant Evaluation Form as of December 31, 2017 from the Orthodox Christian priest, who serves at the church, where you are a member, with this application?

I certify that the information enclosed is complete and correct to the best of my knowledge, and that I have read and understood the instructions and enclosures that are provided with this application. I further understand that I must complete, sign and submit my application and applicable enclosures, postmarked or delivered to a courier service that provides tracking on or before the applicable **application acceptance period deadline** (See the last page of the Scholarship Program Applicant Instructions for exact dates).

I also certify that I am the author of the enclosed essay. I understand that if any part of the application or any enclosures are found to be inaccurate, incomplete or falsified, I may be denied these scholarship awards.

I understand that my tuition information enclosed with my application will be used to calculate my scholarship award.

If, after submitting my application, I determine that my circumstances have changed, I will complete, sign and mail an Application and/or Scholarship Award Modification Request Form (see www.TVBIET.org for a copy of this form) within 10 calendar days of my determination so that my scholarship award, if any, will be recalculated for the Fall Semester, August 2018-December 2018 and/or the Spring Semester, January 2019-May 2019.

Circumstances that require this modification form include but are not limited to the following:

- I decrease the number of my academic credit hours.
- I reallocate my academic credit hours from one semester to another for the 2018 Fall and 2019 Spring Semesters.
- I change my academic institution(s).
- I no longer attend an academic institution that meets the scholarship criteria.
- I withdraw my application for consideration.
- I withdraw my Award Acceptance Form for consideration.
- I am subsequently notified of a tuition only scholarship(s) from other source(s).
- I become disqualified or academically ineligible before or after commencement of the 2018 Fall and/or 2019 Spring Semesters but while full or partial tuition refunds are available.
- Other changes affecting my scholarship award.
- Other material changes to my application.

I understand that failure to submit an “Application and/or Scholarship Award Modification Request Form”, when applicable, may result in undesired allocations, a delay in the disbursement of my scholarship award, result in legal action for recovery of any unpaid reimbursement due from me and/or disqualification from present or future scholarship awards.

I agree to comply with the Scholarship Award Refund Process. If I receive this scholarship award and do not use it to pay for my tuition for the Fall Semester, August 2018-December 2018 and/or Spring Semester, January 2019-May 2019, I will repay any unused scholarship award that was **PAID DIRECTLY TO ME OR REFUNDED DIRECTLY TO ME**, either in whole or in part, within 10 calendar days of such receipt by issuing and mailing or delivering to a courier service a check payable to The Valentine Braun Irrevocable Education Trust.

I further consent to the release of any disbursement and/or personal contact information to facilitate the direct payment of these scholarship awards, to my academic institution(s) in which a scholarship award is sought.

Applicant Signature

Date

Printed Name of the Applicant