

Bonhomme Lions Scholarship

APPLICATION FORM - DUE FRIDAY, JANUARY 11, 2019

The Bonhomme Lions are longtime supporters of education in the St. Louis area and have been providing scholarships to graduating SSD students for many years. Winners of the scholarships are recognized at the annual **Commitment to Kids Banquet on April 4, 2019.**

Scholarship Guidelines

- ◆ Students must receive at least one special education service from SSD and/or attend an SSD technical high school.
- ◆ The essay portion (Part III) of the application must be completed by the student.
- ◆ Students must be seniors during the 2018-2019 school year.
- ◆ Applicants may include one letter of recommendation up to two pages in length.
 - Please check box if a letter of recommendation will be sent separately.

Complete the application form and return it to the Communications Department via one of the following ways:

E-mail to: Wes Buchek at wbuchek@ssdmo.org

By mail to: SSD Communications; Attn: Wes Buchek; 12110 Clayton Road, Town & Country, MO 63131

By fax: 314.989.8470

Contact Wes Buchek at wbuchek@ssdmo.org or 314.989.8102 with questions.

PART I - APPLICANT INFORMATION

Name: _____ Birthdate: _____

Home Address: _____

City: _____ State: _____ Zip: _____

E-mail: (required) _____

Service(s) Applicant Receives from SSD: _____

Applicant Signature: _____ Date: _____

- For electronic submissions, in lieu of a signature, by cecking box you verify all above information is accurate.

Parent/Guardian Name: _____

Parent/Guardian Signature (if applicant is a minor): _____ Date: _____

- For electronic submissions, in lieu of a signature, by cecking box you verify all above information is accurate.

Parent/Guardian Address (if different from applicant): _____

City: _____ State: _____ Zip: _____

Parent/Guardian Daytime Phone: _____ Parent/Guardian Evening Phone: _____



Bonhomme Lions Scholarship

APPLICATION FORM - DUE FRIDAY, JANUARY 11, 2019

PART II - SCHOOL INFORMATION

School: _____ District: _____

Teacher/Sponsor Name (optional): _____ Teacher/Sponsor E-mail: _____

Teacher/Sponsor Home Phone (optional): _____ Teacher/Sponsor Work Phone: _____

School Address: _____

Teacher/Sponsor Signature: _____

For electronic submissions, in lieu of a signature, by checking box you verify all above information is accurate.

Name of College/Post-Secondary Institution you plan to attend: _____

City/State: _____

Estimate the annual amount of funds required to attend the chosen college or post-secondary institution:

\$

How did you hear about this scholarship?

- SSD website (www.ssdmo.org)
- SSD's Facebook page (www.facebook.com/SSDStLCo)
- SSD's Twitter account (@SSDStLCo)
- Special Edition (District newsletter)
- SSD Unfiltered (District e-newsletter)
- From an SSD employee
- Word of mouth
- Other (please specify): _____

2018-2019



Bonhomme Lions Scholarship

APPLICATION FORM - DUE FRIDAY, JANUARY 11, 2019

PART III - APPLICANT ESSAY (Maximum Length — two pages total)

*Essay portions may be submitted separately as a Word document.

I. Provide background information on achievements in academics, arts, athletics and/or community service.



Bonhomme Lions Scholarship

APPLICATION FORM - DUE FRIDAY, JANUARY 11, 2019

PART III - APPLICANT ESSAY (continued)

*Essay portions may be submitted separately as a Word document.

2. Describe the expected benefits from attending the college or post-secondary institution listed.

PART IV - PHOTO

The SSD Communications Department will be highlighting the scholarship winners on the District's website and social media platforms. If you are selected as a winner, please be prepared to share a photo for the District to use for this purpose.

**SPECIAL SCHOOL DISTRICT OF ST. LOUIS COUNTY
PERMISSION FORM – TO PHOTOGRAPH AND/OR RECORD**

GENERAL INFORMATION

Occasionally media may come to SSD classrooms and buildings to report on newsworthy programs and events involving our staff and students. In addition, SSD's Communications Department may photograph and/or videotape other students and share these stories with SSD staff and families through the District's newsletter, Web site or other publications, including social media. The information may include images and identifying information of students, educators and community partners on its Web site, and in its print and electronic publications. Parent/guardian permission is needed for SSD to use images of students under the age of 18; individual permission is needed for those students 18 years of age and older.

As parent and/or legal guardian of _____, I hereby grant permission to the SSD and news media to photograph, tape record or videotape my child or myself and to use this photograph, voice or video recording in publications, slides, video tapes, motion pictures, newsletters, newspapers, education Web sites, news Web sites and social media. I understand that the resulting photographs, stills, slides, videotapes, motion pictures and audio tapes may be published for the purpose of instruction or informing staff, students, parents or the general public about District / school programs or events. Reasonable adjustments may be made to images, materials and formats for purposes of editorial, layout and delivery.

YES NO

As parent and/or legal guardian of _____, I hereby grant permission to the SSD and news media to use my child's name and biographical information in stories involving District / school programs or events. I understand that this information may be used in publications, television or radio broadcasts, newsletters, newspapers, education Web sites, news web sites and social media for the purpose of instruction or informing staff, students, parents or the general public about District / school programs or events.

YES NO

As parent and/or legal guardian of _____, I hereby grant permission for my child to be photographed by _____ Special School District on _____ 4/4/2019 while my child is attending/participating in _____ Commitment to Kids Banquet.

YES NO

SCHOOL OR ORGANIZATION INFORMATION

School or Organization: _____

School District (If Applicable): _____

Teacher's Name (If Applicable): _____

PARENT/INDIVIDUAL SIGNATURE

Student's name (please print): _____

Student's date of birth: _____

Parent/guardian signature: _____ Date: _____

Address: _____

Phone number: _____