

# SARAH ADAMS MEMORIAL SCHOLARSHIP

The family of Sarah Adams is proud to introduce the “Sarah Adams Memorial Scholarship.” This scholarship is designed to bring honor to Sarah’s life that was tragically cut short in a tragic car accident on December 6, 2008. Sarah was a Kiel High School graduate who was part of the 2007 graduating class. While a student at Kiel High School Sarah took almost every visual art class that Kiel High School had to offer. Even in her first year at UW Sheboygan, she took more art classes. Art was a part of her life. After one successful year at UW Sheboygan, she decided to go to Martins School of Cosmetology to combine her love for art with an employable trade. In honor of her life, the family of Sarah Adams is starting an annual scholarship fund in her name that will be given out to two Kiel High School graduating seniors every year starting with the graduating class of 2009. These scholarships will be two \$1,500.00 scholarships with one given to a Kiel High School graduating senior who is pursuing a degree in the visual arts and one Kiel High School graduating senior who is pursuing a degree in cosmetology. These students will be able to use these monies for all in state and out of state schools as long as they are majoring in art or cosmetology as their college education.

**SCHOLARSHIP AMOUNT:** TWO-\$1,500 ANNUAL SCHOLARSHIPS.

**-ONE \$1,500 SCHOLARSHIP AWARDED TO A STUDENT PURSUING A DEGREE IN ART.**

**-ONE \$1,500 SCHOLARSHIP AWARDED TO A STUDENT PURSUING A CAREER IN COSMETOLOGY.**

**ELIGIBILITY:** ANY KIEL HIGH SCHOOL GRADUATING SENIOR WHO IS PURSUING A DEGREE IN ART OR COSMETOLOGY.

**TYPE OF SCHOOL:** ANY COSMETOLOGY SCHOOL, TECHNICAL SCHOOL, 2 or 4 YEAR COLLEGE WITH A MAJOR IN THE VISUAL ARTS OR ART SCHOOL.

**WHERE TO SEND:** SEND APPLICATIONS TO KIEL HIGH SCHOOL GUIDANCE DEPARTMENT

**HOW AND WHO CHOOSES THE WINNERS:** THE FAMILY OF SARAH ADAMS WILL CHOOSE THE WINNERS. THE WINNERS WILL BE CHOSEN BASED ON THEIR ACADEMIC PROGRESS AT KIEL HIGH SCHOOL AND ON THE INFORMATION GATHERED ON THE SCHOLARSHIP APPLICATION. **THE ESSAY WILL MAKE UP 50% OF THE DECISION.**

**SCHOLARSHIP PRESENTATION:** THE SCHOLARSHIP WILL BE PRESENTED TO THE WINNERS AT THE KIEL HIGH SCHOOL SENIOR BANQUET FROM A MEMBER OF THE SARAH ADAMS FAMILY.

**SCHOLARSHIP MONIES:** SCHOLARSHIP FUNDS WILL BE DISPERSED AND MANAGED BY THE SARAH ADAMS MEMORIAL SCHOLARSHIP FUND HELD BY NEW YORK LIFE INSURANCE COMPANY. ERICK & ANNE ADAMS WILL MANAGE THE FUND.

**OBTAINING THE AWARD:** THE SELECTED STUDENT(S) IS REQUIRED TO SEND A COPY OF THEIR FIRST COLLEGE SEMESTER TUITION BILL (That is usually received the month of August) SO THAT THE \$1,500 AWARD CAN BE SENT DIRECTLY TO THE EDUCATIONAL INSTITUTION.

SARAH ADAMS MEMORIAL SCHOLARSHIP  
C/O ERICK & ANNE ADAMS  
43215 Trail Inn South Road  
Cable, WI 54821

**DEADLINE:** FRIDAY, MARCH 28, 2014

**SCHOLARSHIP CONTACT:** ERICK & ANNE ADAMS, 920-374-0758 OR THE KIEL HIGH SCHOOL GUIDANCE DEPARTMENT, 920-894-2263.

**EDUCATIONAL REQUIREMENTS TO APPLY FOR SCHOLARSHIP (S):**

1. MUST BE A KIEL HIGH SCHOOL GRADUATING SENIOR
2. MUST NOT HAVE FAILED ANY KIEL HIGH SCHOOL CLASS
3. MUST BE ATTENDING A COSMETOLOGY SCHOOL, TECHNICAL SCHOOL, 2 or 4 YEAR COLLEGE WITH A MAJOR IN VISUAL ART OR ART SCHOOL.
4. A COPY OF A KIEL HIGH SCHOOL TRANSCRIPT IS REQUIRED.
5. THIS IS NOT A RENEWABLE SCHOLARSHIP

**APPLICATION:** USE THE ATTACHED SCHOLARSHIP APPLICATION TO APPLY.

# SARAH ADAMS MEMORIAL SCHOLARSHIP

NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ST: \_\_\_\_\_ ZIP: \_\_\_\_\_

E-MAIL: \_\_\_\_\_ PH: \_\_\_\_\_

FATHER'S NAME: \_\_\_\_\_

FATHER'S PLACE OF OCCUPATION AND JOB TITLE: \_\_\_\_\_

MOTHER'S NAME: \_\_\_\_\_

MOTHER'S PLACE OF OCCUPATION AND JOB TITLE: \_\_\_\_\_

NUMBER OF BROTHERS OR SISTERS ATTENDING POST-SECONDARY EDUCATION:

HIGH SCHOOL ACTIVITIES: (HONORS, AWARDS, AND OFFICES HELD)

LIST COMMUNITY ACTIVITIES:

LIST WORK EXPERIENCE:

WHAT SCHOOL/UNIVERSITY DO YOU PLAN TO ATTEND?

HAVE YOU BEEN ACCEPTED? \_\_\_\_\_

WHAT CAREER DO YOU PLAN TO PURSUE?

HOW MUCH FINANCIAL ASSISTANCE DO YOU ANTICIPATE THAT YOUR PARENTS WILL SUPPLY TOWARD YOUR EDUCATION EXPENSES?

WHAT IS YOUR ANNUAL ESTIMATED COST OF TUITION AND EXPENSES?

**LIST ANY OTHER SCHOLARSHIPS FOR WHICH YOU HAVE APPLIED:**

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**LIST ANY SCHOLARSHIPS YOU HAVE RECEIVED:**

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**PLEASE INDICATE ANY DIFFICULTIES YOU MAY ENCOUNTER AS YOU PURSUE YOUR HIGHER EDUCATION PROGRAM:**

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# **ESSAY**

**HOW WILL YOUR CAREER IN ART/COSMETOLOGY HELP OTHER PEOPLE AND MAKE THE WORLD WE LIVE IN A BETTER PLACE?**

- 1. PLEASE WRITE A MINIMUM OF A 1-PAGE, TYPED, DOUBLE SPACED ESSAY.**
- 2. 50% OF THE SCHOLARSHIP DECISION IS BASED ON THIS ESSAY.**
- 3. THE ESSAY NEEDS TO BE ON A SEPARATE SHEET OF PAPER AND ATTACHED TO THE REST OF THE APPLICATION.**

**\*\*IT IS PREFERRED THAT YOU TYPE ALL OF YOUR ANSWERS TO THE QUESTIONS ABOVE IN A DOUBLE-SPACED FORMAT BEFORE SUBMITTING. AN ELECTRONIC COPY OF THIS CAN BE SENT TO YOU VIA E-MAIL SIMPLY BY E-MAILING A REQUEST TO:**

**[erickandanne@gmail.com](mailto:erickandanne@gmail.com)**

**DEADLINE: FRIDAY, MARCH 28, 2014 AT 3 P.M.**

**BRING COMPLETED APPLICATION TO THE KIEL HIGH SCHOOL GUIDANCE DEPARTMENT**

## **DID YOU REMEMBER?**

- 1. TO FILL OUT THE COMPLETE SCHOLARSHIP APPLICATION**
- 2. ATTACH A COPY OF YOUR KIEL HIGH SCHOOL TRANSCRIPT**
- 3. ATTACH YOUR ESSAY**
- 4. BRING TO KIEL HIGH SCHOOL GUIDANCE DEPARTMENT NO LATER THAN MARCH 28, 2014 3 P.M.**