

**RUSSELL “SONNY” KISSEL SCHOLARSHIP FUND  
RULES AND REGULATIONS**

1. The Greater Ohio Showmen’s Association Russell “Sonny” Kissel Scholarship Fund offers a minimum of one or more scholarships up to \$1,000.00 each.
2. A scholarship is renewable, subject to review, and is given in expectation that a scholar will receive it annually for up to two years, if the required standards are maintained.
3. Awards are given for superior scholarship. Among criteria for measuring a student’s scholarship are: test scores, scholastic performance and high school recommendations. Such factors as a student’s extra-curricular activities and employment may also be considered. The scholarships are awarded on the basis of the student’s own merit and accomplishments. The matter of financial need and family situation are not factors in these awards. Awards will be for academic achievement, character, and promise.
4. To be eligible, an applicant must be qualified to enter an accredited junior college, college or university. The student must be classified as a FULL TIME STUDENT according to the criteria of the institution they are attending.
5. Scholarships will be paid in the following form: The funds will be paid directly to the student during the month of January. In the event the student drops out and there is a refund, it will be paid directly to the Greater Ohio Showmen’s Association Russell “Sonny” Kissel Scholarship Fund.
6. Applicants may be interviewed by representatives of the Greater Ohio Showmen’s Association. Recipients may also be interviewed by a scholarship committee member or their representative at any time in connection with the review pertinent to continuing the award for the subsequent year.
7. Applicant must submit with his or her application a two page essay on any subject.
8. The payment of funds will be discontinued if the recipient’s academic grade average falls below the level established by his/her school as a minimum for eligibility.
9. Applications must be submitted by November 1<sup>st</sup> of the school year. Applications may be submitted after January 1<sup>st</sup> of the student’s senior year in high school.
10. Applications will be held for only one year. Applicants are encouraged to reapply.
11. Grades and proof of enrollment from the institution must be received as soon as possible after the end of the fall quarter or semester in order to issue checks in January.
12. Attached with the application is a form that must be completed by a high school counselor and sent to the address indicated.

**RUSSELL "SONNY" KISSEL SCHOLARSHIP FUND  
APPLICATION**

**MUST BE COMPLETE-(PLEASE TYPE OR PRINT)**

Date of Application: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Age: \_\_\_\_\_ Sex: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Place of Birth: \_\_\_\_\_

Married or Single: \_\_\_\_\_

Are you a dependent of, or are you a member of the G.O.S.A.?

Dependent:	Yes	Member:	Yes
	No		No

Name of member and relationship (If applicable): \_\_\_\_\_

Subjects of interest at college: \_\_\_\_\_

Degree desired: \_\_\_\_\_

Post graduate studies planned: Yes No

Names, addresses, and dates of secondary schools attended:

Current educational Status: \_\_\_\_\_ (Junior, Senior, etc.)

**RUSSELL "SONNY" KISSEL SCHOLARSHIP FUND  
HIGH SCHOOL INFORMATION**

To the High School Counselor:

Please complete this section of the application for scholarship on behalf of

\_\_\_\_\_, class of \_\_\_\_\_  
(name of applicant)

Deadline for returning application is November 1, 20\_\_\_\_\_.

Please return application to the address below.

Thank you for your assistance in providing the information requested below:

1. Standardized Test Scores:

S.A.T.:        Date Given: \_\_\_\_\_  
                  Verbal: \_\_\_\_\_  
                  Math: \_\_\_\_\_

A.C.T.:        Name & Form of Test: \_\_\_\_\_  
                  Date Given: \_\_\_\_\_  
                  I.Q. Percentile: \_\_\_\_\_  
                  Grade Score: \_\_\_\_\_

2. Exact rank in class: Number \_\_\_\_\_ in class of \_\_\_\_\_ based on \_\_\_\_\_ semesters.

3. Estimate of applicant's success:    \_\_\_\_\_ Superior Student  
  \_\_\_\_\_ Above Average Student  
  \_\_\_\_\_ Average Student  
  \_\_\_\_\_ Some Difficulty

4. In general, does the applicant make effective use of time and energy in the performance of academic responsibilities? Yes \_\_\_\_\_ No \_\_\_\_\_

5. General over-all comments: \_\_\_\_\_  
\_\_\_\_\_

6. Please attach a copy of the student's High School transcript.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

High School: \_\_\_\_\_ Phone: \_\_\_\_\_