



BALDWIN EMC

Your Touchstone Energy® Cooperative 

P.O. Box 220
Summerdale, AL
36580-0220
(251) 989-6247

www.baldwinemc.com



The Baldwin County Electric Membership Charitable Foundation College Scholarship Application

Scholarship Guidelines and Instructions
2009-2010 Academic Year



The mission of the Baldwin County Electric Membership Charitable Foundation is the accumulation and disbursement of funds for charitable purposes to organizations and individuals located within Baldwin and Southern Monroe County. Such disbursements of funds shall be for needs related to food, shelter, clothing, health needs, education, and environment. This endeavor will reflect Baldwin EMC's goal of being a customer focused, efficient, and community involved cooperative.

Because the donated monies that make up this scholarship fund come from people who pay their power bills in our area, we the members of the Foundation Board are committed to being good stewards of this scholarship fund. Therefore, we request that you read and complete this application in its entirety. Please be careful.

PLEASE READ OVER YOUR APPLICATION CAREFULLY AND CONFIRM THAT IT IS COMPLETE BEFORE YOU TURN IT IN. AN INCOMPLETE APPLICATION WILL BE AUTOMATICALLY REJECTED.

10/14/09



Baldwin Electric Membership Corporation in 2004 became the 200th cooperative nationwide to adopt a community assistance program called "Operation Round Up". This program provides basic needs of food, shelter, clothing, health needs, education, and environment to those who meet the criteria. Under education this program provides funding to encourage and inspire the student to achieve their scholastic and career goals.

BASIS OF SELECTION

In selecting the recipient of this scholarship, the scholarship committee will consider the following: scholastic achievement, character, leadership, service, career and life goals and any other pertinent information or circumstances that may heighten your need for this scholarship. The following persons may apply for this scholarship.

- Students or graduates who have a permanent address within Baldwin County or District one of southern Monroe County. A map is attached to the back of this application for your assistance.
- Individual with a strong "C" average or above
- An individual with a high school GED
- Any past recipient or applicant



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REQUIREMENTS FOR SCHOLARSHIP CONSIDERATION

The applicant must: (Check boxes are provided in the margin for ease of completion)

Fill out the application honestly and **COMPLETELY**. All applications must be received no later than **4:30 p.m.**, close of business on **February 26, 2010**, at any of the following Baldwin EMC offices: *Summerdale, South Baldwin District Office, North Baldwin District Office, and South Monroe County.*

- Provide certified transcript of grades from high school
- Provide a copy of one of the following:
 - ACT score of 15 or better
 - SAT score of 700 or better
- Attach a typed, double spaced essay describing in 75-100 words, your educational, career, and life goals. Include why you have chosen this goal and how you will give back to your community/society.
- Submit two (2) letters of recommendation: from non-family members
- Submit one (1) letter from high school authority: (form enclosed page 13)
- If not a United States citizen, or permanent resident, please provide a certified copy of student visa
- Provide a copy of most current tax return for applicant and/or parent
- First time applicant must be available for personal interview if selected as a finalist

SCHOLARSHIP CONDITIONS

The terms and conditions, on which the scholarships are to be made for the 2009-2010 scholarship year, are as follows:

1. The scholarships shall be transmitted to the accredited school selected by the scholarship recipient.
2. The scholarship shall be granted to graduates or individuals with high school equivalent.
3. Scholarships will be announced and awarded in the spring prior to recipient's graduation, but are contingent and subject to the scholarship recipient graduating from high school and passing any required graduation exam.



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SCHOLARSHIP CONDITIONS CONTINUED

4. The scholarship will be paid by the Foundation directly to the educational institution for credit to the students account at the institution with notification of receipt to be received from the educational institution.
5. In order to qualify for the scholarship, the student must attend a four year college, a junior college, a technical school or vocational school of the scholarship recipient's choice provided that such school chosen is an accredited institution.
6. In order for the scholarship funds to be received to the benefit of the scholarship recipient, the student must enroll on a full-time basis at the institution selected. That full-time status must be certified by the institution. Failure to qualify as a full-time student will result in a rescission of the scholarship with the funds being returned from the institution to the Foundation. Possible exceptions to this rule may be made by the Foundation on a nondiscriminatory basis.
7. The scholarships will not be awarded solely based on need.



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SCHOLARSHIP APPLICATION

Name of Applicant _____
Last First Middle

US Citizen Student Status Visa Renewal Request Permanent Resident

Address: _____

Residence Address Mailing Address

City or Town State County Zip Code

Telephone Number

Email Address _____ Date of Birth _____ Social Security # _____

Name of Parent (Mother) _____
Last First Middle

Address: _____

Residence Address Mailing Address

City or Town State County Zip Code

Telephone Number

Email Address _____ Social Security # _____

Name of Parent (Father) _____
Last First Middle

Address: _____

Residence Address Mailing Address

City or Town State County Zip Code

Telephone Number

Email Address _____ Social Security # _____



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SCHOLARSHIP APPLICATION

OR

Name of Guardian _____
Last First Middle

US Address: _____
Residence Address Mailing Address

City or Town State County Zip Code

Telephone Number

Email Address

Social Security # _____

High School and/or College:				
Name	Address	City or Town	State	Zip Code

Date of High School Graduation: _____,

College Major: _____

Colleges Applied (list school(s) in priority order):				
Name	Address	City or Town	State	Zip Code



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SCHOLARSHIP APPLICATION

All Scholarships Applied for (give status) and / or Received:					
Name of Scholarship	Amount	Received	Denied	Unknown	Renewable

Community & Extracurricular Activities:	Dates	Hours Per Week

Honors & Awards:	Date(s) Received

Applicant's Employment History: (Most Recent First)							
Employer	Address	City	State	Zip Code	Dates		# Hours Per Week
					From	To	



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Financial Condition: as of _____ 20__.

If parents or guardians provide more than 50% of applicant's living expenses, their most recent tax forms are required. If applicant is independent, the applicant's most recent tax forms are required.

ASSETS:

Cash

Banking Institution	Address	Account	Amount

Real Estate

Type (Home, Land, etc.)	County	Partial or Wholly Owned	Market Value

Securities

Description: Stocks, Bonds, CD, etc.	Identification #	Value

Other

Type (Personal Property, Auto, Life Insurance - Cash Value, etc. Include description, account no., etc.)	Value

Total Assets	\$
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Financial Condition: as of _____ 20__.

If parents or guardians provide more than 50% of applicant's living expenses, their most recent tax forms are required. If applicant is independent, the applicant's most recent tax forms are required.

LIABILITIES:

Notes Payable

Lender's Name	Address	Amount

Mortgage

Mortgagor's Name	Address	Amount

Other Debt

Type (State Type: Taxes, Outstanding Bills, Other)	Amount

Total Liabilities	\$
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Financial Condition: as of _____ 20__.

If parents or guardians provide more than 50% of applicant's living expenses, their most recent tax forms are required. If applicant is independent, the applicant's most recent tax forms are required.

Monthly Expenses: (Average)

		Monthly Payment
Housing (CIRCLE ONE)	Mortgage <input type="checkbox"/> Rent <input type="checkbox"/>	
Food		
Utilities	Electric	
	Gas	
	Telephone	
Transportation	Automobile Payments	
	Gasoline	
Insurance	Medical	
	Life	
	Automobile	
Charge Accounts (Specify Type)		
Loans (Specify Type)		
Property		
Taxes (Specify Type)		
Other Expenses (Specify Type)		
Total Monthly Expenses		\$



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Monthly Income Applicants and/or Parents

If parents or guardians provide more than 50% of applicant's living expenses, their most recent tax forms are required. If applicant is independent, the applicant's most recent tax forms are required.

***Must include copy of most recent tax forms**

****please provide parent's income**

	Parent Income	Applicant Income	Total Amount
Salary			
Bonus, Tips & Commissions			
Social Security			
Supplemental Security Income (SSI)			
Real Estate Income			
Other financial support: (Please state: Alimony, Child Support, Dividends & Interest, Other), Parental Assistance, Student Loans/Grants, etc.			
Total Sources of Monthly Income	\$	\$	\$

Other Members of Household (including those away at college):				
Last	First Name	Middle	Relationship	Attending College
				Yes <input type="checkbox"/> No <input type="checkbox"/>
				Yes <input type="checkbox"/> No <input type="checkbox"/>
				Yes <input type="checkbox"/> No <input type="checkbox"/>
				Yes <input type="checkbox"/> No <input type="checkbox"/>

Employment of All Other Household Members:				
Name	Employer	Address	City	State

List any other special financial considerations: _____



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The information contained in this statement is for the purpose of obtaining funding from the Baldwin County Electric Membership Charitable Foundation, Inc. on behalf of the undersigned. Each undersigned recognizes the information provided herein shall be used to determine grant funding, and each undersigned represents and warrants the information provided is true and complete. Furthermore, the *Baldwin County Electric Membership Charitable Foundation, Inc* may consider this statement as continuing to be true and correct until a written notice of a change is provided. The Baldwin County Electric Membership Charitable Foundation, Inc is authorized to make all inquiries they deem necessary to verify the accuracy of the statements made herein.

ELIGIBILITY

Recipients of this scholarship are subject to certain conditions of enrollment, usage of scholarship funds, requirement of grades and certain other criteria, including good moral character. Conditions of scholarship will be explained in a letter to the recipient of the scholarship. Acceptance of funds by the recipient will constitute acceptance of the terms of the scholarship.

Signature of Applicant

Signature of Parent or Guardian

Date

Completed application and all other required documents must be received no later than 4:30 p.m., close of business on February 26, 2010 at any of the following Baldwin EMC offices: Summerdale, South Baldwin District Office, North Baldwin District Office, and South Monroe County.

We recommend you review the checklist provided on page 3 to be sure your application is complete.



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HIGH SCHOOL EDUCATOR'S RECOMMENDATION FORM

Name of Applicant: _____
(Last) (First) (Middle)

School: _____
(High School) (Street or P.O. Box) (City or Town) (State) (Zip Code)

County: _____

To Be Completed by Educator/Counselor

1. How well, how long and in what capacity have you known the applicant? _____

2. How firm is the applicant's commitment to his/her proposed field of study? _____

3. In your opinion, do you feel that this student will continue his/her education until completion?

4. In comparison to other students, whom you have known at comparable stages of their careers, how would you rate the applicant in the following areas? If you are unable to evaluate an area, please leave it blank.

	Excellent	Above Average	Average	Below Average
Seriousness of Purpose				
Initiative				
Maturity				
Adaptability				
Enthusiasm				
Emotional Stability				
Leadership				
Public Speaking				

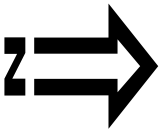
HIGH SCHOOL EDUCATOR'S RECOMMENDATION FORM

5. Please cite a specific example of how, in your association with the applicant, he or she has demonstrated the above qualities.

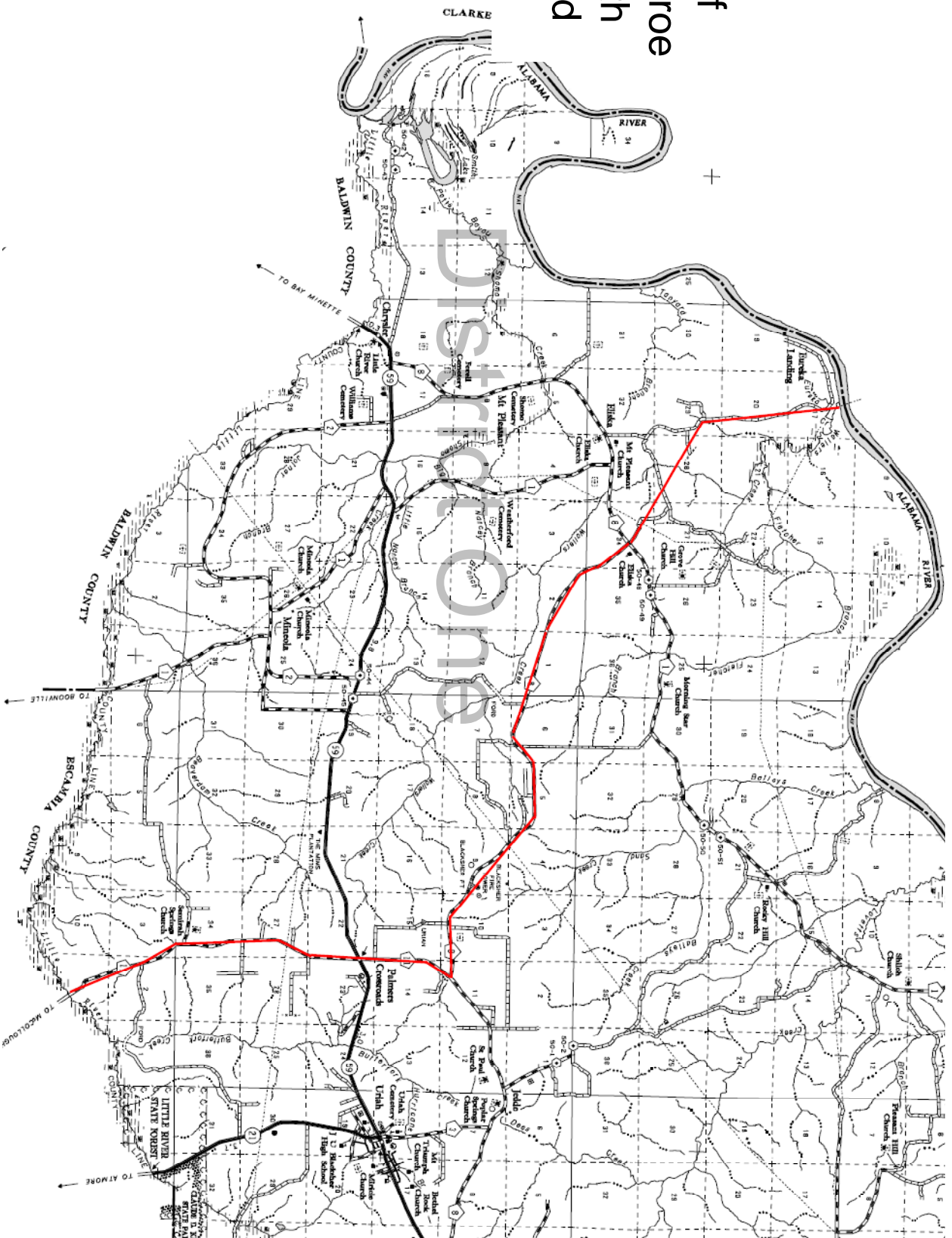
(Signature)

(Title or Position)

(Date)



Baldwin EMC
service area of
Southern Monroe
County is south
and west of red
line



South Monroe County