



Dorothy Kemp Leonard Scholarship Application

This scholarship was established by the estate of “Dot Kemp” to provide tuition payments for a student graduating from Canton Area High School, who desires to go to a technical institution, trade school and similar schools. This scholarship is for applicants interested in learning and practicing trades such as cosmetology, plumbing, welding, forestry, masonry, carpentry, auto mechanics, auto body, licensed practical nurses, horticulture and courses of a similar nature

Eligibility Criteria:

- Graduating senior from Canton Area High School.
- Accepted into an accredited university, college, or technical school.
- Essay (250 word double spaced) on what makes you an excellent candidate to further pursue your education.
- A transcript of your high school grades.
- Attach two reference letters.
- An attendance report that includes your past three or four years of education.
- Please provide your expected family contribution (EFC) number which is generated by the Free Application for Federal Student Aid Form (FAFSA)

Please see your guidance office for deadlines.



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Type or print neatly in black or blue ink. Only complete applications will be considered.

Personal Information:

Last Name		First Name		MI
Street Address				Apt. /Unit Number
City	State	Zip Code	Home Phone	Cell Phone
Sex: M	F	Date of Birth: ____/____/____ MM/ DD/ YYYY		Name of High School
				Date of Graduation
E-mail Address				

Parental Information:

Father's Last Name		First Name		MI
(If different) Street Address		Apt. /Unit Number		Email Address
City	State	Zip Code	Best Available Phone Number	
Name of Employer			Employed Since	
Mother's Last Name		First Name		MI
(If different) Street Address		Apt. /Unit Number		Email Address
City	State	Zip Code	Best Available Phone Number	
Name of Employer			Employed Since	

Employment Information:

Do you currently have a part-time job? Y		N	If yes: _____ Position
Name of Employer		Employer's Phone Number	



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School Based Information:

Major Field of study in college: _____

Name of the college, university or technical school you will attend:

G.P.A. _____ SAT Score _____ or ACT Score _____

Class Rank _____ of _____ # students.

I attest that all personal data included within this application is truthful and in no way misleading. All contents have been completed entirely by me (the applicant) to the best of my knowledge.

If I am selected as a recipient of a Community Foundation for the Twin Tiers scholarship, I agree to permit the Foundation to confer with my school to verify my continuing enrollment during the term of my scholarship.

I also agree that my name and photograph can be used in announcements made by the Community Foundation for the Twin Tiers regarding the particular scholarship (s) for which I have been awarded.

I also agree that by signing this I permit my school to give the Community Foundation for the Twin Tiers information regarding my SAT scores, current GPA and class rank.

Awards may be used at any accredited, nonprofit college or university within the United States.

Signature of Applicant

Date of Signature