



***The J. S. "Sid" Glasson Scholarship,
The Daniel F. & John R. Hayes Scholarship &
The Jim & Betty Tower Memorial Scholarship
for Family Practice***

Please Note: These scholarships are for students entering a professional medical or related field

Instructions: Please submit this form as a cover for your most recent transcript and a letter of application to the Blue River Community Foundation at the address above by January 15. Suggested contents for the letter are information about you, your background, course of study, and future plans.

Name: _____
Last First M.I.

Permanent Address: _____
Street City, State Zip

School: _____ Area of Study: _____

Preferred Contact Information (*phone # or e-mail*) _____

All applicants must commit to the following statements.

I am aware that Blue River Community Foundation Scholarships may be used only at an accredited educational institution. I also understand that the awards will be announced in the spring and summer of each year. In addition, I understand that the information contained in my application may be shared with the scholarship advisory committee, the Foundation's Board of Directors and /or the scholarship sponsor.

If selected as a scholarship winner, the Blue River Community Foundation has my permission to use my photograph and any general, non-financial information included in this application for publicity purposes.

I authorize school personnel and/or other individuals to provide data or information about me as a part of this application directly to the Blue River Community Foundation, including but not limited to my current academic transcript, and I waive the right to review any such submissions.

I hereby affirm that I am a resident of Shelby County and the information provided on this application is accurate and complete to the best of my knowledge. (Falsification of information may result in disqualification and/or termination of any scholarship granted.)

Applicant Signature

Date

Please submit your application with required attachments to:

BLUE RIVER COMMUNITY FOUNDATION

Attn: Julie Alvis

54 WEST BROADWAY, SUITE 1

SHELBYVILLE, IN 46176

317.392.7955

or email jalvis@blueriverfoundation.com