The Donald J. DeYoung Scholarship fund was created in 1997 by friends and colleagues of Judge DeYoung to honor his 18 years of service as a probate court judge. The scholarship is designed to assist students who have had contact with the Family Division of the Circuit Court (through adoption, foster care, unaccompanied minors, probation, or neglect services) and are interested in pursuing college or vocational education. Students may attend the educational institution of their choice.

**Eligibility:**
Residents of the West Michigan area who are wards of the court or previously have been a ward of the court and have been discharged successfully are eligible to apply for the Donald J. DeYoung Scholarship. Applicants will need a reference letter from a caseworker, probation officer, foster care college coach, school counselor, mentor, or other supportive adult. The scholarship may be used at any educational institution within the United States. Applicants must be accepted at a college/university or training and trade school to apply. There is no maximum age limit to receive this scholarship. Awards generally range from $1,000 to $2,000 and can be renewed if the recipient continues to meet the minimum grade point requirement.

**Selection criteria:**
Selection of scholarship recipients will be based upon the following criteria:

- A grade point average of 2.5 or higher (must provide most recent high school or college transcript)
- Extracurricular activities or responsibilities within or outside of the school setting.
- A written essay on the topic of your involvement/connection to the court system, what it has meant to you, and your education plans.
- Letter of recommendation/support from a caseworker, probation officer, foster care college coach, school counselor, mentor, or other supportive adult.

**Application Procedure:**
Applications are available at Grand Rapids Community Foundation and on our website at [www.grfoundation.org](http://www.grfoundation.org). Applications are due by March 1. All applicants will be notified of the award decisions in mid-May. Recipients may re-apply in subsequent years.
Donald J. DeYoung Scholarship Application

Directions: Complete the application and email by March 1 to scholarships@grfoundation.org

Applicant Information

Name:  ○ Ms.  ○ Mr. ________________________________

Address: __________________________________________

City: ______________________ State: __________________ Zip: ________________

Home phone: ______________________ Work Phone: ______________________

Last 4 SSN: xxx-xx-______  E-Mail: ________________________________

(Provide an email you check often as this is how we contact you)

Date of Birth__________________________ Race: ______________________

Are you a First Generation College Student?:  Yes_______  No ______________

If student is a minor, name and address of legal guardian:

Name: __________________________________________

Address: __________________________________________

City: ______________________ State:_____ Zip:_______ Phone: ________________

Referred by (caseworker name): ________________________________

School Information

High School attended: ________________________________

Name of college or educational institution you plan to attend: ________________________________

Chosen course of study:______________________________________________________________

Upcoming year in School: ______________  Cumulative GPA __________________

(Must attach most recent high school or college transcript showing cumulative GPA)

Work experience (if applicable)

Please describe recent work experience, if applicable.

__________________________

__________________________

__________________________
Extracurricular Activities, Awards, and Honors
Please describe extracurricular activities in which you were involved during high school or any extra family responsibilities you may have had, and/or any awards or honors you may have received.

Essay:
Please attach a brief essay of no more than 500 typewritten words describing your involvement/connection to the court system and your education plans. Include the reason for your college choice and your planned area of study.

Letter of Recommendation:
A letter of recommendation is required from a caseworker, probation officer, foster care college coach, counselor, mentor, or other supportive adult describing their connection to the applicant, their current status, and why the applicant deserves to receive the scholarship.

Financial Need:
Dependency Status:
Dependent Student: Provide Parent and Student income information. Application will be rejected if parent information is missing.
Independent Student: Provide Student Information Only: To be considered an Independent Student, you must be able to answer yes to ONE of the following questions:

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
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<tbody>
<tr>
<td>Were you born before January 1, 1997?</td>
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<td>Are you married?</td>
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<td>Are you working on a degree BEYOND a bachelor’s degree for the upcoming academic year?</td>
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<td>Are you currently, or were you, an orphan or ward of the court or in foster care at any time since the age of 13?</td>
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<td>Are you a veteran of the US Armed Forces?</td>
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<td>Are you currently serving on active duty in the US Armed Forces for purposes other than training?</td>
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<td>Do you have children who receive MORE THAN half of their support from you?</td>
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<tr>
<td>Are you an emancipated minor as determined by the court in the state of your legal residence?</td>
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<tr>
<td>Do you have dependents (other than children or spouse) who live with you and you provide more than half of their support?</td>
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<td>Are you homeless or at risk of being homeless?</td>
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<td>Are you currently or were you previously in legal guardianship?</td>
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</tbody>
</table>

Applicant is considered (check only one)

☐ Dependent Parent(s) and Student’s Combined Adjusted Gross Annual Income from 2018: $ __________
   Number in parent’s household, including applicant: __________________________

☐ Independent Student’s Adjusted Gross Annual Income: $ ________ & total dependents other than spouse ________

Need:
Anticipated Expenses Total Cost of Attendance for upcoming year (Include fees and room and board) $ __________

Anticipated Resources
A) Family Contribution (EFC from your FAFSA Student Aid Report) $ __________
   (if you are unable to file a FAFSA, leave (A) blank)
B) All Scholarships and Grants offered to date $ __________
   (returning college students: provide last year’s awards if new award package is not available)
C) Any Other Resources (do not include any loans offered) $ __________

Total Resources (Total of A, B and C) $ __________

Assessed Need (Expenses Less Resources) $ __________
Certification

In submitting this application, I certify that the information is complete and accurate to the best of my knowledge. I understand that falsification of information will result in termination of any scholarship granted. If selected to receive a scholarship, I agree to the use of my name, likeness and information contained in my application (excluding financial information) for promotional purposes for the Grand Rapids Community Foundation without further compensation or notification.

Applicant’s Signature: ___________________________________________ Date: __________________________
You may sign electronically by typing your name.

APPLICATION DEADLINE: MARCH 1

Submit the following via email to scholarships@grfoundation.org

- Application Form
- Essay
- Unofficial Transcript
- Letter of Recommendation

For additional information, please contact Ruth Bishop, Education Program Officer

Grand Rapids Community Foundation
Phone: 616-284-4903
e-mail: rbishop@grfoundation.org