



Kenosha Firefighters CARE

Community Assistance Response Effort

8530 30th Ave, Kenosha, WI 53144

Kenosha Firefighters CARE Scholarship

Description of Scholarship Program

In recognition of student volunteerism in Kenosha County, Kenosha Firefighters CARE has established scholarships for graduating seniors from Kenosha County public and private high school.

In support of student volunteerism, the scholarships recognize individuals who have made significant contributions to the Kenosha community through their volunteer efforts while maintaining academic excellence. The scholarships have been established to acknowledge and reward that service.

Kenosha Firefighters CARE scholarships are funded each year through contributions from Kenosha Firefighters Local 414 and Kenosha Fire Department Fire Administration, all of whom are members of Kenosha Firefighters CARE.

Criteria for Selection

- Applicants must demonstrate contributions to the Kenosha community through volunteer service.
- Volunteer services may include summer, school, community, church, and cultural activities.
- Applicants must provide three written references from adults knowledgeable of volunteer service performed.
- Applicants must be graduating seniors from a Kenosha County public or private high school.
- Recipients must provide proof of acceptance to an accredited college, business or vocational school prior to acceptance of scholarship funds.

Deadline: April 30th

Applications are available at 2121 Roosevelt Road in the Fire Department Administration, and are due by the **close of business April 30th** and should be mailed or hand-delivered to:

Kenosha Firefighters CARE Scholarship
8530 30th Ave
Kenosha, WI 53142

Selection Process

Kenosha Firefighters CARE scholarship recipients are selected each June by members of the Kenosha Firefighters CARE Board. Board members select recipients by consensus after thorough review of submitted applications. One \$500 scholarship will be awarded to the top two individuals selected.

Announcement and Presentation of Awards

The Kenosha Firefighters CARE scholarships and the scholarship recipients are publicized through the local news media. Scholarships will be presented at high school awards assemblies or other appropriate public venues.

Questions

Contact Paul Reget at (262) 496-8444 or by email at preget@kenosha.org.

The mission of Kenosha Firefighters C.A.R.E. shall be to provide assistance through charitable efforts to those individuals or organizations in the community during times of hardship, loss, or other unmet needs.



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APPLICATION FORM

I. General Information

Name Telephone

Address

City State Zip

Parent/Guardian's Name Daytime Phone

II. Volunteer History

Please list volunteer service performed during your four years of high school, including specific organizations or activities supported, and identify for each the total hours volunteered and a reference. Specific dates and hours should be identified. (Use additional paper if necessary.)

1. Organization / Activity Supported

Total Hours Volunteered

Reference / Contact Information

2. Organization / Activity Supported

Total Hours Volunteered

Reference / Contact Information

3. Organization / Activity Supported

Total Hours Volunteered

Reference / Contact Information

4. Organization / Activity Supported

Total Hours Volunteered

Reference / Contact Information

III. Educational Plans

What are your plans for post-high school educational studies?

Where do you plan to attend? Date to begin: Have you been accepted? If not, when do you expect a response?

IV. Brief Essays *Continue on separate sheet(s), if necessary.*

Please describe why you decided to become involved in your chosen volunteer activity(ies).

Please describe your most meaningful volunteer experience.

What effect has your volunteer experience had on your plans for the future?

V. References *(References must come from non-family members)*

Please list three adult references, each who must provide a written recommendation (please attach with application) and who have worked with you in a volunteer capacity.

1. Phone
2. Phone
3. Phone

I declare the information in this application to be true and accurate, to the best of my knowledge.

Signature of Student, Date

Signature of Guardian, Date

Return application and three letters of recommendation by **April 30th** to:

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