# Seattle’s Bravest Charity

517 2nd Avenue West • Seattle • WA • 98119 • (206) 285-1271

#### IAFF Local 27

April 1, 2019

Hello Scholarship Applicant:

Education is vitally important, and thanks to Fire Fighter Kenny Hoefner, Seattle's Bravest Charity (SBC) is excited to offer college scholarships again this year to the children and grandchildren of Seattle Fire Fighters.

Please make sure all documents arrive in one package, with one exception. If your educational institution will not give you an official, sealed transcript, please request that the school mail it directly to SBC at the above address. Transcripts that are sent directly from your school may arrive separately but must arrive or be postmarked by July 15, 2019.

**The deadline for the application is July 15, 2019.**

#### Best of luck and contact me if you have any questions. Sincerely,

Hilton Almond Secretary/Treasurer Seattle's Bravest Charity halmond@iaff27.org 206.786.5983

Seattle’s Bravest Charity is a 501(c) (3) tax-exempt nonprofit organization.

Our tax-exempt number is 91-1674237.

Andy Sapier, President

Kym LeRoy, Vice President ∙ Hilton Almond, Treasurer

**M. KENNETH HOEFNER SCHOLARSHIP FUND APPLICATION PROCESS**

### Review the "Eligibility Requirements for Selection" criteria to confirm eligibility to receive an award from the M. Kenneth Hoefner Scholarship Fund.

1. Submit a typed and completed application. **MUST BE TYPED**.

### Submit two letters of recommendation from instructors or work/volunteer supervisors.

1. Submit sealed official high school or college transcript. \**Transcripts may arrive separately if sent directly by school or educational institution.*

### Submit a 300-500-word essay following the prompt found on page 6. Please attach additional pages if necessary.

1. Submit Community Service Experience form(s).
2. Submit Work Experience form(s).
3. Submit signed "Terms of Scholarship Award" form.
4. Submit the completed**\*\*** application package to:

**Seattle's Bravest Charity**

**c/o M. Kenneth Hoefner Scholarship Fund 517 2nd Ave W**

**Seattle, Washington 98119**

#### Hours of Operation: Monday-Friday 8am-3pm

Closed Holidays

Award notifications will be sent by email by August 19, 2019.

**Application packets must be hand-delivered or postmarked by July 15, 2019**

**\*\***A completed application package will include: typed application form, two letters of recommendation, official transcripts, essay, Community Service Experience form(s), Work Experience form(s), and signed “Terms of Scholarship Award” form. **Please make sure all documents arrive in one package, with one exception. If transcripts are sent directly from your school, they may arrive separately.**

## M. KENNETH HOEFNER SCHOLARSHIP FUND ELIGIBILITY REQUIREMENTS

**FOR SELECTION**

To be eligible to receive a scholarship from the M. Kenneth Hoefner Scholarship Fund, an applicant must meet **all** of the following requirements:

* 1. The applicant must be a child, grandchild, or IRS qualified dependent of an active, retired or deceased fire fighter of the Seattle Fire Department.
	2. The applicant must currently be a senior in high school, high school graduate or enrolled in an undergraduate program between the ages of 17 – 25 and must have maintained a cumulative GPA of 3.0 or above from the most recent educational institution attended.
	3. The applicant shall not have been convicted of any crime resulting in incarceration or

probationary sentences.

* 1. The applicant must hand deliver or postmark a **completed scholarship application packet** (including typed application form, recommendation letters, official sealed transcripts, essay, Community Service Experience form(s), Work Experience form(s), and the signed “Terms of Scholarship Award” form.

Meeting all eligibility requirements does not guarantee a scholarship award. This is a competitive process. All award decisions will be based on academic performance, extracurricular activities, community service, essay, work experience and commitment to self-improvement.

##### Scholarship award notifications will be sent by or before August 19, 2019.

The M. Kenneth Hoefner Scholarship Fund makes scholarship awards to students without regard to student's race, color, national and ethnic origin, sex or disability. All students who meet the eligibility requirements are invited to apply.

##### M. KENNETH HOEFNER SCHOLARSHIP FUND APPLICATION

First Name Last Name

Click or tap here to enter text.

Click or tap here to enter text.

Click or tap here to enter text.

Click or tap here to enter text.

Phone Number Email

Age Date of Birth

Click or tap here to enter text.

Click or tap here to enter text.

Click or tap here to enter text.

Date of HS Graduation

Click or tap here to enter text.

Address

Click or tap here to enter text.

Click or tap here to enter text.

City State Z

 Zip Code

Click or tap here to enter text.

Click or tap here to enter text.

Click or tap here to enter text.

Click or tap here to enter text.

Undergraduate Institution:

Semester/Year Applying For:

 Custodial Parent/Guardian(s) Name(s)

Click or tap here to enter text.

Name of Seattle Fire Dept. Member [ ]  Active [ ]  Retired [ ]  Deceased

SFD Member Contact Phone (if deceased, spouse or closest kin) Relationship

Click or tap here to enter text.

List all educational institutions and dates attended starting from most recent, back to Grade 9.

If more space is needed, please attach additional pages.

Click or tap here to enter text.

Institution

Give the names and contact information of the two individuals you selected for personal recommendation letters.

The individuals you choose may not be friends or relatives. They may be instructors, coaches or work/volunteer supervisors.

Click or tap here to enter text.

 Name

 Phone

 Email

Relation to applicant:

Click or tap here to enter text.

Click or tap here to enter text.

Click or tap here to enter text.

Name

Phone

Email

Relation to applicant:

Click or tap here to enter text.

Click or tap here to enter text.

Click or tap here to enter text.

Click or tap here to enter text.

## Community Service Experience Form

#### Please complete and submit a community service experience form for each organization you have worked with since Grade 9.

Name of Organization: Name of Supervisor: Supervisor E-mail:

Click or tap here to enter text.

Click or tap here to enter text.

Click or tap here to enter text.

 Supervisor Phone:

Click or tap here to enter text.

Click or tap here to enter text.

#### Volunteer Hours: Per [ ]  Day [ ]  Week [ ]  Month [ ]  Other\*

\*If other, please specify:

Click or tap here to enter text.

#### Dates of Volunteer Work:

\*if currently volunteering with this organization please put today's date in "End" field.

#### Start: End\*:

Click or tap here to enter text.

Click or tap here to enter text.

Did you hold an Officer Position? If so, please list title:

Click or tap here to enter text.

Click or tap here to enter text.

Dates as Officer:

\*if currently an Officer with this organization, please put today's date in "End" field.

#### Start:

#### End\*:

Click or tap here to enter text.

Description of Volunteer Duties:

Click or tap here to enter text.

**Work Experience Form**

Please complete and submit a work experience form for any previous employment you may have since Grade 9.

Click or tap here to enter text.

Name of Company: Name of Supervisor:
Supervisor Phone:

Click or tap here to enter text.

Click or tap here to enter text.

Click or tap here to enter text.

 Supervisor Email:

Click or tap here to enter text.

#### Work Hours: Per [ ]  Day [ ]  Week [ ]  Month [ ]  Other\*

Click or tap here to enter text.

\*If other, please specify:

#### Dates of Employment:

\*if currently employed by this company please put today's date in "End" field.

Click or tap here to enter text.

#### Start: End\*:

Click or tap here to enter text.

Did you hold a Supervisor Position? If so, please list title:

Click or tap here to enter text.

Click or tap here to enter text.

Click or tap here to enter text.

Dates as Supervisor:

\*if currently a Supervisor with this company please put today's date in "End" field.

#### Start: End\*:

Click or tap here to enter text.

Description of Work Duties:



**M. KENNETH HOEFNER SCHOLARSHIP FUND ESSAY PROMPT**

In 300 to 500 words, please describe to the SBC Executive Board how you have recovered from a challenge, a disappointment, or a mistake.

Please attach a separate word document.

Seattle’s Bravest Charity is a 501(c) (3) tax-exempt nonprofit organization.



## M. KENNETH HOEFNER SCHOLARSHIP FUND AWARD TERMS OF AGREEMENT

All scholarship award recipients of the M. Kenneth Hoefner Scholarship Fund are subjected to the following terms:

1. Recipients are only to use scholarship awards for tuition, books, or other educational related expenses at an accredited institution of higher education. If it is discovered that the recipient did not use the scholarship award in this manner, then the award will be returned to the M. Kenneth Hoefner Scholarship Fund.
2. In order to receive this award, students must submit copies of receipts for either tuition, books, or room and board to Seattle’s Bravest Charity (SBC). Please either email a copy of the receipt to halmond@iaff27.org or mail a copy to SBC @ 517 2nd Ave West, Seattle, WA 98119. You will **NOT** receive your award until we receive your receipts.

By signing this document, the M. Kenneth Hoefner Scholarship Fund applicant agrees that any reward he/she receives will be received under the terms outlined above.

Click or tap here to enter text.

Click or tap here to enter text.

Applicant’s typed name Date

Applicant’s signature

Seattle’s Bravest Charity is a 501(c) (3) tax-exempt nonprofit organization.