



**INOLA EDUCATIONAL ENRICHMENT FOUNDATION**  
**110 N. Broadway, Inola, OK 74036**



**Inola Educational Enrichment Foundation Scholarship Application**

Parts I, II and III are to be completed by the applicant's principal or counselor. Parts IV, V, and VI are to be completed by the applicant. All pages along with the Application Form must be returned to the Inola School District Foundation Scholarship Committee.

**I. Students Name:** \_\_\_\_\_

Students Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

High School Address: P O Box 789, 801 E. Commercial  
 City: Inola State: OK Zip: 74036

**Students Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**SCHOLARSHIP AWARD**

The Inola Educational Enrichment Foundation awards scholarships on the basis of a comprehensive process. Areas that are reviewed by the committee include, but not limited to the following: Academic Accomplishments, Community Service, References, your Goals in 100 Words or more and Financial Need.

**CRITERIA**

- Applicants must have reside in or attend the Inola School District.
- Applicants must be completing high school successfully with a minimum unweighted GPA of 2.5 on a 4.0 scale.
- Applicants must be accepted as a full time student at a college, university, or trade school program for the upcoming academic semester.
- Student must complete and submit a **Scholarship Application by Friday, April 18, 2025.**

**APPLICATION PROCESS**

Applicants must provide:

- Completed application form. (Be sure to answer Goals in 100 words or more.)
- Official high school transcript in a sealed envelope from the institution.
- Two academic references from a guidance counselor or teacher.
- A reference letter from an employer or other community member.
- College, University, Vocational or Technical school you plan to attend.

**Deadline for the application is Friday, April 18, 2025.** Application after this date will not be considered.

**Please submit application to: High School Counselor**

Educational Institution Student Plans to attend (Indicate Name and location of School):

First Choice		Second Choice	
School	City, State	School	City, State

Applicant Number \_\_\_\_\_ (To Be Completed by Counselor)

College Entrance Examination Score: (please circle the examination taken)

**ACT** Composite Score \_\_\_\_\_ **SAT** Combined Score \_\_\_\_\_

II. Students Cumulative High School Grade Point Average (GPA) Excluding Spring Semester of Senior Year. \_\_\_\_\_

III. Please list Students Classes for Terms Indicated.

Junior Year	Grade

Senior Year	Grade

- Note any Honor’s Classes

IV. Financial Need: In the space provided please indicate your family’s **ADJUSTED GROSS INCOME** from your latest tax return.

	Under \$15,000
	\$15,000 to \$20,000
	\$20,000 to \$25,000
	\$25,000 to \$30,000

	\$30,000 to \$35,000
	\$35,000 to \$50,000
	\$50,000 to \$65,000
	Over \$65,000

Total number of family members living at home: \_\_\_\_\_

Number of dependents in your parent’s family including yourself:

Children \_\_\_\_\_ Ages \_\_\_\_\_ Number Attending College \_\_\_\_\_

V. Extracurricular Activities – Organizations (Years involvement and offices held).

Organization	Years	Offices Held




Principal or Counselor: \_\_\_\_\_ Date: \_\_\_\_\_

**Application deadline is Friday, April 18, 2025. No exceptions! Please return applications to the High School Counselor upon completion.**