



Fundracers  
**Karyn Vecchio Irwin Memorial**  
2022-2023  
Scholarship Application

**A Scholarship in Honor and Memory of Karyn Vecchio Irwin** - a loving, caring, wife, mother, sister, daughter, friend and educator.

**Summary of Qualifications**

The Karyn Vecchio Irwin Memorial Scholarship will be awarded on February 28, 2023 to one or more students who meet all the following requirements...

1. Have a sincere desire to pursue a degree in Education.
2. Be a United States citizen,
3. Have a cumulative grade point average from high school of at least 3.0,
4. Have received a high school diploma from an accredited public or private high school by July 1, 2022,
5. Be accepted to and plan to attend an accredited public or private college or university in 2023.

The award amount of this annual scholarship depends on the number of scholarships awarded, as well as the amount of donations to the scholarship fund. The award amount will be announced on February 25, 2023 with recipients of the scholarship being announced on March 1st 2023.

Each applicant must complete this application in full, and submit it to **Fundracers - 2217 Independence Lane, Buford Georgia 30519**, no later than February 15, 2023

**Personal Information**

Full Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Parents/Guardians: \_\_\_\_\_

Date of Birth : \_\_\_\_/\_\_\_\_/\_\_\_\_

**EDUCATION**

High School \_\_\_\_\_

Graduation Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Cumulative GPA (current) \_\_\_\_\_

**SCHOOL Involvement**

**List any clubs or sports or teams you are involved in**

Club/Sport Name and Sponsor Name/Coach

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**Community Involvement**

Name of organization \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Contact Name: \_\_\_\_\_

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Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Contact Name: \_\_\_\_\_

**Education Plans**

If you have already made your final decision about the college or university you will be attending in 2021 , you only need to provide the following information for that institution. If you have not yet made a final decision, provide the following information for *each* institution to which you have applied or have been accepted for the Fall, 2023 term. List them in order by how likely you would be to attend. (Use additional sheets if necessary).

Name of College or University \_\_\_\_\_

Address/Location \_\_\_\_\_

Have you submitted a formal application to this institution? \_\_\_\_\_

Have you been officially accepted to attend this institution in the Fall of 2023? \_\_\_\_\_

What is the approximate annual tuition? \_\_\_\_\_

How much of that annual tuition will you be responsible to pay? \_\_\_\_\_

**Financial Need**

Briefly describe your need for financial assistance for college. While this scholarship is not awarded based on need, the Scholarship Board would appreciate this information in helping to determine scholarship amounts and distribution. If you would prefer not to provide this information, write "I do not wish to provide this information" and continue with the next question.

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\_\_\_\_\_  
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**Career Plans**

Use this page (and additional pages if necessary) to discuss your future career plans

1. If you have any general or specific career plans or desires for the future, describe these plans as accurately as in as much detail as possible, along with how your plans apply to Christian service. If there is more than one career option you are considering, describe each option separately.
2. If you do not have any general or specific career plans, list and describe particular careers that you are interested in or possibly have a desire to pursue.

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## **References**

List below two (2) references below who can be contacted if necessary to provide information about you that may assist in qualifying you for this scholarship.

### **Reference 1**

This should be someone who can provide a reference as to your life outside of church (Example: a friend, mentor, adult friend of your family, etc.)

Name:

Address:

Phone: What is your relationship with this person?

### **Reference 2**

This should be from someone in a leadership position at the church with which you are affiliated. (Example: a pastor, youth minister, Sunday School teacher, deacon, etc.)

Name:

Address:

Phone: What is your relationship with this person?

## **Other Information**

Please provide any other information you would like to provide to the Scholarship Committee for consideration with your application. (Attach additional sheets if necessary).

## **Affirmation**

I, the undersigned, do promise or affirm that the information provided in this application is true and accurate to the best of my knowledge. Should there be any changes in the information provided in this application, I will be responsible to communicate these changes to the Scholarship Board of Fundracers LLC.

Signature:

\_\_\_\_\_ Date: \_\_\_\_\_