

**SENATOR DAN RUTHERFORD**  
320 North Plum Street  
Pontiac, IL 61764  
(815) 842-3632

**GENERAL ASSEMBLY SCHOLARSHIP APPLICATION FORM**

University to Attend \_\_\_\_\_

Name \_\_\_\_\_

Phone number Day \_\_\_\_\_ Evening \_\_\_\_\_

Street Address \_\_\_\_\_ Town & Zip \_\_\_\_\_

Applicant's E-mail address \_\_\_\_\_

Resident of 53rd District Yes\_\_\_ No\_\_\_ You must be a resident of the 53rd District.  
You can find a map of the District on our website: [www.DanRutherford.com](http://www.DanRutherford.com)

Date of Birth \_\_\_\_\_ Social Security Number \_\_\_\_\_

Occupation (if applicable) \_\_\_\_\_

Parents' Name and Address(es) \_\_\_\_\_

Parents' Telephone Numbers \_\_\_\_\_

Parents' E-mail Address(es) \_\_\_\_\_

Brothers & Sisters (names & ages) \_\_\_\_\_

Spouse (if married) \_\_\_\_\_ Spouse's Occupation \_\_\_\_\_

Children (Names & Ages) \_\_\_\_\_

**Educational Background**

(Please give years attended, when graduated, and major, if applicable)

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

College(s) \_\_\_\_\_

Rank in high school/college class \_\_\_\_\_ Number in class \_\_\_\_\_

Grade point average in high school \_\_\_\_\_ in college \_\_\_\_\_

SAT Score \_\_\_\_\_ ACT Score \_\_\_\_\_

Major of Study \_\_\_\_\_ Declared Yes \_\_\_ No \_\_\_

Career Goals:

\_\_\_\_\_  
\_\_\_\_\_

Are you currently receiving any scholarship aid or tuition assistance? (If yes, please explain.)

\_\_\_\_\_  
\_\_\_\_\_

List any school or community activities, awards, clubs, organization, offices, or honors you would like to bring to the Scholarship Advisory Committee's attention:

\_\_\_\_\_  
\_\_\_\_\_

Will there be any financial difficulty in financing your education? \_\_\_\_\_

If yes, please explain \_\_\_\_\_

\_\_\_\_\_

Have you applied to the Illinois Student Assistance Commission? \_\_\_\_\_

Results: \_\_\_\_\_

**Employment History**

(If you have been employed, either full or part time, complete the following.)

Name of Company and Address \_\_\_\_\_  
\_\_\_\_\_

Dates of Employment From \_\_\_\_\_ To \_\_\_\_\_

Duties and responsibilities: \_\_\_\_\_

**Military History**

Are you an active reservist, military person, or veteran? Yes\_\_\_\_ No\_\_\_\_

Is a member of your immediate family an active reservist, military person or veteran?  
Yes\_\_\_\_ No\_\_\_\_

If yes, name of person. \_\_\_\_\_

Relationship to Applicant. \_\_\_\_\_

When and where did you or your relative serve? \_\_\_\_\_  
\_\_\_\_\_

To complete your application, you must submit the following by January 19, 2009.

- (1) Complete application form
- (2) Two (2) letters of recommendation must accompany the application form. The letters cannot be accepted under separate cover from the application.
- (3) Make three (3) copies of the application, letters of recommendation, and all other papers and staple together in three (3) separate packets.

RETURN ALL MATERIALS TO: Scholarship Advisory Committee  
State Senator Dan Rutherford  
320 North Plum Street  
Pontiac, IL 61764