



THE BARDEN BENNER CARTER MEMORIAL FUND
ESTABLISHED FEBRUARY 11, 2001

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The purpose of this award is to offer financial assistance to an individual(s) who chose to put his/her post high school education on hold. The Board is looking for an applicant(s) who has exhibited a sincere desire and willingness to improve their life opportunities through education. The successful applicant(s) will be able to demonstrate the perseverance and dedication needed to successfully complete his/her academic endeavor. To be considered for this award you must:

- Have graduated from Cleveland Hts. High School and been a member of the Cleveland Hts. Varsity Hockey team.
- Be a first time enrollee in a 2 or 4 year college, vocational or trade school.
- Complete the scholarship application
- Provide two letters of recommendation
- Write a 500 word essay on the topic **Challenge or adversity you have faced and how you dealt with the situation.**

The application for this award can be found at www.bardenbennercarter.org. The completed application together with your essay and two personal letters of recommendation are to be submitted for consideration to Ann Kramer at 1073 Woodview Rd, Cleveland Hts Ohio 44121. You will be contacted by a board member to schedule your interview. Award recipients will be notified as early as possible.

The Barden Benner Carter Memorial Fund
P.O. Box 18801
Cleveland Heights, Ohio 44118-1801
www.bardenbennercarter.org

Barden Benner Carter Memorial Award Application



Barden Benner Carter Memorial Fund
P.O. Box 18801
Cleveland Heights, OH 44118

PERSONAL INFORMATION

Please *type or print* your answers

1. First Name _____ Last Name _____
 2. Mailing Address:
Street/Box # _____
City: _____ State _____ Zip: _____
 3. Daytime telephone number () _____
 4. Social Security Number _____
 5. Name of college you will be attending: _____
You will be attending as: (Circle One)
Freshman _____ Currently Enrolled _____
 6. Grade Point Average (GPA): _____ (If currently enrolled) _____
 7. Marital Status: _____ Number of Children: _____
Ages: _____
 8. Employment Status: (Indicate full/part) _____
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EDUCATIONAL INFORMATION

1. Year graduated from High School _____

2. What do you plan to major in as you continue your education?

3. Military or Civil Service Volunteer: (Describe)

Type: _____

Length of time:

FINANCIAL INFORMATION

1. Will you receive financial assistance for tuition and/or fees? (Describe)

Scholarships:

Employer tuition plan:

Stipend / GI Bill / Veteran Assistance:

AWARD NOTE

Recipient may use this award in whatever way it would be most beneficial to his/her future educational development.