

Kids' Chance Scholarship Fund Application

Alabama Law Foundation

Question Group

- Must be 16-25 years old during the semester for which the scholarship is awarded.
- Dependent of a parent who was catastrophically or fatally injured in a work-related accident.
- Enrolled as a full-time student at a university, college, technical, or trade school.

Student Name*

Last, First Name

Character Limit: 100

I. Student Information

Student's Street Address*

Character Limit: 250

City*

Character Limit: 250

Student's Email*

Character Limit: 254

Alternative Email

Ex. Parent/Guardian's Email

Character Limit: 254

Date of Birth*

Character Limit: 10

II. Family Information

Guardian's Names*

Character Limit: 250

Number in Household*

Character Limit: 250

How many are minor children?*

Under 18 years old

Character Limit: 250

III. Academic Information

Name and Address of High School Attended*

Character Limit: 2000

Please list any college or technical schools you have applied to.*

Include names and addresses of schools applied to:

Character Limit: 1000

Please list any college or technical schools you have been granted admission to.*

Note which school you plan to attend and provide your student number.

Character Limit: 2500

Major field of intended study.*

Character Limit: 250

Month and year you expect to graduate from college or trade school.*

Example:

May 2027

Character Limit: 50

Career objective.*

Character Limit: 500

How do you plan to finance your education?

List sources and amounts of income including Prepaid Affordable College Tuition Program (PACT), loans, grants, scholarships, employment, savings and parental or family contributions.

Character Limit: 1000

Do you plan to live at home or on campus?*

Choices

Campus

Home

School Year Work Status

If you will be employed during the regular school year please specify the type of work and the approximate number of hours per week:

Character Limit: 250

Other circumstances which you feel the Kids' Chance Committee should know:

In reviewing your application, feel free to let us know more about you that we have not asked.

Character Limit: 2000

IV. Financial Information of Household

Household Income*

Please include the **MONTHLY AVERAGE** for each of the below.

Character Limit: 250

Workers' Compensation Payment*

Character Limit: 20

Disability Insurance*

Character Limit: 20

Income of other parent (Gross)*

I don't know how I feel about this question.

Character Limit: 20

Additional Income:

Additional income of other dependents of injured or deceased employee residing in the same household with applicant. Please itemize.

Character Limit: 10000

Where did you hear about this scholarship?*

Choices

Attorney

Case Manager

College Official/Advisor

High School Counselor/Advisor

Kids' Chance Postcard or Email

Online Search

Parent or Family Member

Other