

2026 Hayswood Foundation, Inc. Scholarship Programs

Lois Mathewson Bronson Walden Scholarship (Lewis Co. High School, Only)

Please read carefully and provide the information and attachments as instructed. YOU are ultimately responsible for ensuring that your application is complete, and that all required materials are submitted by the due date.

Answer all questions as completely as possible. If you have questions, contact the Foundation office by sending an email to hfound@att.net (recommended), or by calling (606) 563-9333.

GENERAL ELIGIBILITY REQUIREMENTS: Applicants must be residents of Lewis County and, if selected, maintain residency in order to continue receipt. Only members of the current graduating class at Lewis County High School are eligible to apply for first-time receipt. A high school cumulative grade point average of at least 2.8 is required. You must be under the age of 25 at the time of initial application. Members of the families of the current directors or staff of Hayswood Foundation, or of the original donor of the scholarship program, are ineligible. Applicants must be planning to attend an accredited Kentucky college or university as a full-time student. Scholarships may be applied to undergraduate, graduate, and professional school studies provided a 2.8 minimum cumulative grade point average is maintained and the recipient continues status as a full-time student.

SUBMISSION DEADLINE: Completed applications (the attached 5-page application form plus all of the additional materials required) are to be submitted to either the office of the Guidance Counselor at Lewis County High School, or to the office of Hayswood Foundation at 135 West Second Street, Suite 1A, Maysville, **no later than 3:00 P.M. Wednesday, April 15, 2026.**

AWARDS: Scholarships are awarded for one-year periods, and are paid directly to the recipient's school, in substantially equal payments, prior to each term. Past recipients must submit a renewal application to retain their scholarships.

COMMUNITY SERVICE REQUIREMENT: Since this is a community-based scholarship, each recipient selected must complete 10 hours of community service, during the following year, in order to apply for renewal of their scholarship the following college year. Service will be documented on our Community Service Report Form, and the form submitted when it is time to renew the scholarship. More information is available on our website, hayswood.org.

CONFIDENTIALITY: To ensure privacy when submitted, it is recommended that application materials be placed in a sealed envelope.

REQUIRED ATTACHMENTS:

In addition to the application form, provide ALL of the attachments listed, below.

- A) Copy of your high school transcript, including a copy of your student report showing classes taken during this year. **OPTIONAL:** If you received a score of 3 or higher on any AP exam, provide a copy of your score(s).
- B) Official college transcript for classes completed (Not needed if classes are on your high school transcript.).
- C) Documentation of ACT or SAT score (For ACT, provide composite score records, not superscore.).
- D) Copy of Financial Aid Award Letter from the college that you plan to attend.
- E) Copy of your senior resume, listing accomplishments and involvement in classroom and extracurricular activities, and community involvement.
- F) Copy of Pages 1 and 2 of your and your parents' 2024 federal income tax returns, if applicable.
- G) Two Teacher Recommendation Forms (provided with this application) completed by current or past teachers, and a letter of recommendation from someone other than a teacher who is acquainted with you.
- H) A written statement about your goals in college, and what receiving a scholarship would mean to you.
- I) A photo, that may be used for a news release if you are selected.

Lois Mathewson Bronson Walden Scholarship Application

GENERAL INSTRUCTIONS

- Complete this form by computer, typing, or clearly printing in ink. If you have questions, email hfound@att.net, or call (606) 563-9333.
- Write only on the front of the application sheets, and on the front of any attachments. Information on the back of sheets may be missed when making copies for evaluation. If additional space is needed, indicate on the application that separate sheets are attached, and indicate on attached sheets the section of the application that is being supplemented.
- The applicant's name must appear on all supplemental information attached to or accompanying this application.

Refer back to this application's cover sheet for supplemental information (academic records, tax information, letter of recommendation, teacher recommendation forms, etc.) which is required in addition to this completed application form.

INFORMATION ABOUT APPLICANT

Name: _____ Last 4 Digits of Social Security No.: _____

Full Principal Address: _____

Your Email Address: _____ Parent's email address: _____

Home Phone Number.: _____ Phone number where you can be reached at college: _____

Date of birth: _____ Marital status: () single () married Number of dependents: _____

Rank in high school graduating class: _____ of _____ total graduates

Current cumulative grade point average: _____ (2.8 cumulative minimum required)

Are you a resident of Lewis County? ____ Yes ____ No (Lewis County residency required)

Name(s) of parent(s)/guardian(s): _____

Principal Address of parent(s)/guardian(s): _____

Do you have a sibling (including step brothers and sisters, and adopted siblings) who has received one of these scholarships?

SIBLING'S NAME

SIBLING'S NAME

Will you be the first member of your immediate family (parents; siblings) to attend college? ____ Yes ____ No

College you plan to attend, and its location (must be located in Kentucky): _____

_____ Intended course of study: _____

List your high school's sports teams (other than intramural) on which you were a member and mark your years of participation:

	Freshman	Sophomore	Junior	Senior
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

How did you learn about this scholarship program? _____

Applicant's Name: _____

INFORMATION ABOUT PARENT(S)/GUARDIAN(S)

With whom do you live? () both parents () father () mother () step father () step mother () other

Please check one of the boxes to the right if parents are () divorced or () separated.

Are both parents living? () yes () no

Name of Parent 1: _____ Age: _____

Address (if same as applicant's, write "same"): _____

Name and address of employer: _____

Position held: _____

Name of Parent 2: _____ Age: _____

Address (if same as applicant's, write "same"): _____

Name and address of employer: _____

Position held: _____

APPLICANT'S ASSETS

Indicate, below, your assets including checking and savings accounts, certificates of deposit, savings bonds, stocks, other bonds, trust funds, real estate, and vehicles.

NATURE OF ASSET	VALUE	HOW OBTAINED
Checking and Savings Accounts:	\$ _____	_____
Certificates of Deposit:	\$ _____	_____
Savings Bonds:	\$ _____	_____
Stocks and Other Bonds:	\$ _____	_____
Trust Funds:	\$ _____	_____
Real Estate:	\$ _____	_____
Vehicles:	\$ _____	_____

**FINANCIAL INFORMATION OF PARENTS/GUARDIANS
(OR FOR PARENT WITH CUSTODY, IF DIVORCED)**

**Actual 2025 Amounts From
Federal Income Tax Return**

Estimated Amounts for 2026

Adjusted gross income	\$	Adjusted gross income	\$
Taxable income	\$	Taxable income	\$
Taxable interest	\$	Taxable interest	\$
Income derived from all other sources (including pre-paid living expenses, travel allowances, deferred retirement)	\$	Income derived from all other sources (including pre-paid living expenses, travel allowances, deferred retirement)	\$

List dependents (other than the applicant) for federal income tax purposes in 2025 (If parents are divorced, list dependents for both.):

NAME	RELATIONSHIP TO APPLICANT	AGE	IF LIVING W/FAMILY CHECK HERE	NAME OF SCHOOL IF ATTENDING	GRADE LEVEL
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

FINANCIAL INFORMATION OF NON-CUSTODY PARENT (IF PARENTS ARE DIVORCED)
(If unavailable, parent with custody must provide a written statement to that effect, and explain why.)

**Actual 2025 Amounts From Federal
Income Tax Return**

Estimated Amounts for 2026

Adjusted gross income	\$	Adjusted gross income	\$
Taxable income	\$	Taxable income	\$
Taxable interest	\$	Taxable interest	\$
Income derived from all other sources (including pre-paid living expenses, travel allowances, deferred retirement)	\$	Income derived from all other sources (including pre-paid living expenses, travel allowances, deferred retirement)	\$

CERTIFICATION & AUTHORIZATION BY APPLICANT

As an applicant for a Hayswood Foundation scholarship, I certify that the information I have provided on this application is correct to the best of my knowledge. I understand that my submission of this application in no way guarantees that funds will be awarded, or the amount of the award should I be selected. If selected, I understand that (1) I may attend the college of my choice, provided the institution is accredited and located within the Commonwealth of Kentucky; (2) all scholarship funds awarded will be paid directly to my college, to be applied toward my expenses under the college's normal procedures for the administration of scholarships; (3) I must provide a copy of my class schedule to the Foundation in advance of each semester, as evidence of full-time enrollment, and a copy of an official transcript at the completion of each academic year; (4) the Foundation reserves the right to cancel any scholarship for failure of a recipient to meet academic requirements, or because of a recipient's unlawful conduct; and (5) selection as a recipient for the upcoming school year does not guarantee funding for any subsequent year.

I authorize the release of my academic, attendance, and financial aid information to Hayswood Foundation, Inc.

Signature of Applicant

Date

CERTIFICATION BY PARENTS OR GUARDIANS

(If parents are divorced, the signature of the parent with custody is sufficient.)

To the best of my/our knowledge, the information reported is complete and accurate. I/We agree to inform Hayswood Foundation of any major changes in our information, as reported.

Signature of Parent or Guardian

Date

Signature of Parent or Guardian

Date

Recommendation Letter

It is crucial that the author of your letter of recommendation understands our requirements. To help this process operate as smoothly as possible, write your name on this instruction form and provide it to your letter writer. Remember that you are ultimately responsible for ensuring that your letter is submitted, so remember to follow up with the author to see if his or her letter has been completed and delivered. You may also contact the Foundation office to inquire.

Scholarship Applicant's Name: _____

You have been selected to write a letter of recommendation for a student who is applying for a **2026-2027 Lois M. B. Walden Scholarship** offered by Hayswood Foundation, Maysville. To be eligible to write a letter, you must not be a relative of the applicant, or a director or employee of the Foundation. **Your letter must be signed and dated**, but the date must not be prior to January 1, 2026. Your letter should be no longer than one-page, single side, and should indicate how you are familiar with the student (current or past teacher, family friend, employer, coach, etc.). Do not give your completed letter to the applicant. Instead, submit it as indicated, below, **no later than 3:00 p.m. on Wednesday, April 15, 2026**. A late letter may result in the student's disqualification. Applicants have been made aware that it is their responsibility to contact you soon enough for the letter to be presented on time. Submit your letter to the office of the Guidance Counselor at Lewis County High School, or to Hayswood Foundation by email to hfound@att.net, or in person or by mail to the Hayswood Foundation office at 135 W. Second Street, Suite 1A, P.O. Box 208, Maysville, Kentucky, 41056. If by mail, ensure adequate time for delivery. You may submit letters for multiple students at one time. If you have questions, please contact the Foundation office by email (recommended) to hfound@att.net. You may reach us by phone at (606) 563-9333, although our office is not open on a full-time basis. Your time and effort are greatly appreciated.

Teacher Recommendation Forms

Two Teacher Recommendation Forms are provided with this application set. Fillable pdf versions are also available separately on our website (hayswood.org). It is crucial that the teachers completing your forms understand our requirements. To help this process operate as smoothly as possible, write your name on these instruction forms and provide them to your form preparers. Remember that you are ultimately responsible for ensuring that your forms are submitted, so remember to follow up with the preparers to see if their forms have been completed and delivered. You may also contact the Foundation office to inquire.

Scholarship Applicant's Name: _____

You have been selected to prepare a Teacher Recommendation Form for a student who is applying for a **2026-2027 Lois M. B. Walden Scholarship** offered by Hayswood Foundation. To be eligible to submit a form, you must not be a relative of the applicant, or a director or employee of the Foundation. Your form may be completed by hand, or by computer using fillable pdf versions available on our website: hayswood.org. **Your form must be signed**. Do not give your completed form to the applicant. Instead, deliver it to the office of the Guidance Counselor at Lewis County High School, or mail, email, or deliver it directly to the Hayswood Foundation office **no later than 3:00 p.m. on Wednesday, April 15, 2026**. A late form may result in the student's disqualification. Applicants have been made aware that it is their responsibility to contact you soon enough for the form to be presented on time. If submitting to Hayswood Foundation, email to hfound@att.net, deliver to Hayswood Foundation office, 135 W. Second Street, Suite 1A, Maysville, Kentucky, or mail to us at P.O. Box 208, Maysville, 41056. If by mail, ensure adequate time for delivery. If in person, have an envelope handy to place it in the drop box beside our office door. You may submit letters for several students at one time. If you have questions, please contact the Foundation office by email (recommended) to hfound@att.net. You may also reach us by phone at (606) 563-9333, although our office is not open on a full-time basis. Your time and effort are greatly appreciated.

Scholarship Applicant's Name: _____

You have been selected to prepare a Teacher Recommendation Form for a student who is applying for a **2026-2027 Lois M. B. Walden Scholarship** offered by Hayswood Foundation. To be eligible to submit a form, you must not be a relative of the applicant, or a director or employee of the Foundation. Your form may be completed by hand, or by computer using fillable pdf versions available on our website: hayswood.org. **Your form must be signed**. Do not give your completed form to the applicant. Instead, deliver it to the office of the Guidance Counselor at Lewis County High School, or mail, email, or deliver it directly to the Hayswood Foundation office **no later than 3:00 p.m. on Wednesday, April 15, 2026**. A late form may result in the student's disqualification. Applicants have been made aware that it is their responsibility to contact you soon enough for the form to be presented on time. If submitting to Hayswood Foundation, email to hfound@att.net, deliver to Hayswood Foundation office, 135 W. Second Street, Suite 1A, Maysville, Kentucky, or mail to us at P.O. Box 208, Maysville, 41056. If by mail, ensure adequate time for delivery. If in person, have an envelope handy to place it in the drop box beside our office door. You may submit letters for several students at one time. If you have questions, please contact the Foundation office by email (recommended) to hfound@att.net. You may also reach us by phone at (606) 563-9333, although our office is not open on a full-time basis. Your time and effort are greatly appreciated.

Application Completion Checklist

- Review all information on the application for accuracy.**
- Place your name at the tops of Pages 2 thru 5 of the application, and on each piece of supplemental information accompanying the application form.**
- Provide working email addresses on Page 1** (You need to monitor your email after submission for messages from us regarding our additional needs, or about application omissions that must be corrected.)
- Provide a copy of your senior resume, listing your accomplishments and involvement in classroom, extracurricular, and community activities.**
- Provide a written statement of your goals, and what receiving this scholarship would mean to you.**
- Provide a recent black & white or color photo.**
- Provide a copy of your high school transcript. If currently in high school, also provide a copy of your third-quarter/9-week report card showing year-to-date grades and attendance records.** (The requirement for a high school transcript applies to both high school and college aged applicants.)
- Provide documentation of your ACT or SAT score** (If ACT, scores are to be composite not superscore.).
- OPTIONAL: If you scored a 3 or better on any AP exam, provide documentation to support your score(s).** (Although optional, supplying proof of score could improve your chance for selection.)
- Provide official copies of all college transcripts, if applicable** (Not needed if college classes are listed on your high school transcript.).
- Select two current or past teachers to complete a Teacher Recommendation Form, and a third individual to submit a letter of recommendation.** (Follow up with your form & letter preparers to ensure that they are in our office by the deadline.)
- Sign the application near the bottom of Page 5.**
- Have your parent(s) or guardian(s) sign at the bottom of Page 5** (Not necessary for current recipients applying to retain their scholarships. If your parents are divorced, only the signature of the parent with custody is required.).
- Arrange for the delivery of your application form to the Guidance Counselor at Lewis County High School, or the office of Hayswood Foundation, along with all other required information, before this year's deadline of 3:00 p.m. on Wednesday, April 15, 2026.**