

## 2026 Hayswood Foundation, Inc. Scholarship Programs

**To Apply for the G. L. & Elsie H. Downing, Matt Stahl, Katie DeSpain, Pat Moore, Zachary Ruble, William G. & Rosemary Reetz, and/or Laurance L. Browning, Jr. & Virginia J. Browning Scholarships**

This form is used to apply for the above referenced scholarship programs administered by Hayswood Foundation, Inc. Please read carefully and provide the information and attachments as instructed. Based on the information provided, you will be considered for the scholarships for which you are eligible. 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](mailto:hfound@att.net) (recommended), or by calling (606) 563-9333.

**GENERAL ELIGIBILITY REQUIREMENTS:** You must be under the age of 25 at the time of initial application. You must not have already completed or attended four years of college. Scholarships might not be available for post-graduate studies, so check each program's specific conditions. Members of the families of the directors or staff of Hayswood Foundation, or of the original donors of the scholarship programs, are ineligible. You must have graduated, or be preparing to graduate from an accredited high school, or have completed at least one year of studies at an accredited college or university in the United States. Applicants must be attending or planning to attend, an accredited U. S. college or university 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 in the Foundation office at 135 West Second Street, Suite 1-A, Maysville **no later than 5:00 P.M. on 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 apply for renewal 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 renew his or her scholarship the following college year. Service will be documented on our Community Service Report Form, and the form submitted when it is time for you to renew your scholarship. More information is available on our website, [hayswood.org](http://hayswood.org).

**APPLICATION DELIVERY:** In the event that our office is closed, application materials should be placed in a closed envelope and placed in our drop box.

### REQUIRED ATTACHMENTS:

**Applicants for the G. L. & Elsie H. Downing, Katie DeSpain, Matt Stahl, Pat Moore, and/or William G. & Rosemary Reetz Scholarships:** Provide **ALL** of the attachments listed, below.

**Applicants for the Zachary Ruble and/or Laurance L. Browning, Jr. & Virginia J. Browning Scholarships:** **ONLY** provide attachments A, B, C, F, G, H, and I.

- A) Copy of 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 plus attendance records. OPTIONAL: If you received a score of 3 or higher on any AP exam, provide a copy of your score(s).
- B) Copy of official college transcript for classes completed (Not needed if the classes are on your high school transcript.).
- C) Documentation of ACT or SAT score. For the 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 Pages 1 and 2 of your and your parents' 2024 federal income tax returns.
- F) Two Teacher Recommendation Forms completed by current or past teachers, and a letter of recommendation from someone other than a teacher who is acquainted with you. IF APPLYING FOR THE PAT MOORE SCHOLARSHIP, either the letter or one of the recommendation forms must come from a current or past coach or athletic director.
- G) A written statement about your goals in college, and what receiving a scholarship would mean to you.
- H) A copy of your senior resume.
- I) A photo, which may be used for a news release if you are selected.

# 2026 Hayswood Foundation, Inc. Unified Scholarship Application Form

## FOR NEW SCHOLARSHIPS, ONLY

**FOR HAYSWOOD USE, ONLY**

<input type="checkbox"/> Downing	<input type="checkbox"/> DeSpain
<input type="checkbox"/> Stahl	<input type="checkbox"/> Moore
<input type="checkbox"/> Ruble	<input type="checkbox"/> Reetz
<input type="checkbox"/> Browning	

### GENERAL INSTRUCTIONS

- Complete this form by typing, or clearly printing in ink. If you have questions, email [hfound@att.net](mailto: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 the supplemental information (academic records, senior resume, tax information, Teacher Recommendation Forms, letter of recommendation) which is required in addition to this completed application form.**

### INFORMATION ABOUT APPLICANT

Name: \_\_\_\_\_ Last 4 Digits of Social Security No.: \_\_\_\_\_

Full Home Address: \_\_\_\_\_

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: \_\_\_\_\_

Last High School Attended: \_\_\_\_\_ Rank in HS graduating class: \_\_\_\_\_ of \_\_\_\_\_ total graduates

Current Enrollment Status: ( ) high school student ( ) college student, and in \_\_\_\_\_ year ( ) not currently enrolled

Current cumulative grade point average, or cumulative GPA at the end of last semester attended: \_\_\_\_\_

Name(s) of Parent(s)/Guardian(s): \_\_\_\_\_

Principal Address of Parent(s)/Guardian(s): \_\_\_\_\_

Current resident of Mason County? \_\_\_\_ Yes \_\_\_\_ No Number of years of residency for applicant: \_\_\_\_ For parents: \_\_\_\_

Do you have a sibling (including step brothers and sisters, and adopted siblings) who has received one of these scholarships?  
SIBLING'S NAME
NAME OF SCHOLARSHIP RECEIVED

\_\_\_\_\_

\_\_\_\_\_

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: \_\_\_\_\_

Intended course of study: \_\_\_\_\_

List high school's sports (other than intramural) in which you participated and indicate your years of participation. Include cheerleading.

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

How did you learn about our scholarship programs? \_\_\_\_\_

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: \_\_\_\_\_

**If you choose not to provide financial information, and be considered only for the Zachary Ruble Scholarship and/or the Laurance L. Browning Jr. & Virginia J. Browning Scholarship, which do not require such information, check this box  and skip to Page 5 to provide signatures. Note that doing so will remove you from consideration for five other programs for which you may otherwise qualify.**

**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	\$ _____
Tax-exempt interest	\$ _____	Tax-exempt 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	\$ _____
Tax-exempt interest	\$ _____	Tax-exempt 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)	\$ _____

Applicant's Name: \_\_\_\_\_

**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 United States; (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. The Foundation reserves the right to reclaim any funds which remain unused at the end of the school year, or consider the amount of those unused funds in determining the amount of any future awards.; (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) If I'm a recipient of the G. L. & Elsie H. Downing Scholarship, I must disclose assistance received following the submission of this application. The Foundation reserves the right to reduce the amount of any scholarship awarded should the recipient receive additional funds from other sources.; (5) 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 (6) 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 please 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 scholarship offered by Hayswood Foundation. 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. Do not give your completed letter to the applicant. Instead, mail, email, or deliver it directly to the Foundation office **no later than 5:00 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 by email to [hfound@att.net](mailto:hfound@att.net), by mail to Hayswood Foundation, P.O. Box 208, Maysville, Kentucky, 41056, or by delivery to our office at 135 West Second Street, Suite 1A, Maysville. If by mail, ensure adequate time for delivery. If in person, and our office is not open, leave your letter in the provided drop box. If you have questions, please call the Foundation office at (606) 563-9333 and/or email us at [hfound@att.net](mailto:hfound@att.net). 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 on our website ([hayswood.org](http://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 please 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 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](http://hayswood.org). **Your form must be signed**. Do not give your completed form to the applicant. Instead, mail, email, or deliver it directly to the Foundation office **no later than 5:00 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. Submit by email to [hfound@att.net](mailto:hfound@att.net), by mail to Hayswood Foundation, P.O. Box 208, Maysville, Kentucky, 41056, or by delivery to our office at 135 West Second Street, Suite 1A, Maysville. If by mail, ensure adequate time for delivery. If in person, and our office is not open, leave your form in the provided drop box. If you have questions, please call the Foundation office at (606) 563-9333 and/or email us at [hfound@att.net](mailto:hfound@att.net). 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 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](http://hayswood.org). **Your form must be signed**. Do not give your completed form to the applicant. Instead, mail, email, or deliver it directly to the Foundation office **no later than 5:00 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. Submit by email to [hfound@att.net](mailto:hfound@att.net), by mail to Hayswood Foundation, P.O. Box 208, Maysville, Kentucky, 41056, or by delivery to our office at 135 West Second Street, Suite 1A, Maysville. If by mail, ensure adequate time for delivery. If in person, and our office is not open, leave your form in the provided drop box. If you have questions, please call the Foundation office at (606) 563-9333 and/or email us at [hfound@att.net](mailto:hfound@att.net). 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 school and extracurricular 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.)
- 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 documentation of your ACT or SAT score. For the ACT, provide composite score not superscore. The need for ACT/SAT information applies to both high school and college age applicants.
- 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. To be considered for a Pat Moore Scholarship, either the letter or one of the recommendation forms must come from a current or past coach or athletic director. (Follow up with your form & letter preparers to ensure that they are in our office by the deadline.)

**(For all programs EXCEPT the Zachary Ruble and the  
Laurance L. Browning, Jr. & Virginia J. Browning Scholarships.)**

- Provide copies of Pages 1 and 2 of your 2024 federal income tax form, if applicable (Your Social Security number should be concealed prior to submitting.).
  - Provide copies of Pages 1 and 2 of your parents' 2024 federal income tax return (Social Security numbers should be concealed prior to submitting.).
  - If your parents are divorced, and you are not providing an income tax return, and/or financial information requested on Page 4 for the non-custody parent, provide a signed statement from the parent with custody that the information is unavailable and why (Only one signed statement is required to cover any and all omissions. The absence of any information, even with an explanation, may affect an applicant's chance to receive a scholarship.)
  - Provide a copy of the Financial Aid Letter from the college that you plan to attend.
- 
- Sign the application at the bottom of Page 5.
  - Have your parent(s) or guardian(s) sign at the bottom of Page 5 (If your parents are divorced, only the signature of the parent with custody is required.).
  - Arrange for the delivery of your application to our office, along with all other required information, before this year's deadline of **5:00 p.m. on Wednesday, April 15, 2026.**