



## **2025-2026 Michael Davis Memorial Scholarship**

### **Scholarship Overview**

The Michael H. Davis Family Foundation (MHDF) established the Michael Davis Memorial Scholarship in 2023 to honor the life and legacy of Mr. Michael Davis — a loving father, husband, friend, and passionate advocate for education, community, and lifelong learning. This scholarship is designed to provide financial assistance and mentorship to Kansas high school graduating seniors furthering their education at a 4-year college/university, community college, technical or trade school, with an emphasis on degree completion. The Foundation will award scholarships to a select number of students, with amounts ranging from **\$500 - \$1,000**.

Students must submit a completed application to [info@davisfamilyfdn.org](mailto:info@davisfamilyfdn.org) by **11:59 PM ET on Wednesday, December 31, 2025**.

### **Eligibility Criteria**

To be eligible for this scholarship, applicants must:

1. Currently attend a high school in the State of Kansas
2. Graduate in either December 2025 or May 2026
3. Plan to enroll in a 4-year college or university, community college, or technical/trade school for the 2026-2027 academic year
4. Have a 3.0 cumulative GPA (unweighted)
5. Submit a completed application by 11:59 PM ET on Wednesday, December 31, 2025

### **Required Documents**

Along with your completed application, please send your:

- Unofficial transcript
- Responses to essay questions

## APPLICATION INFORMATION

### Contact information

Student First and Last Name: \_\_\_\_\_

Preferred First Name: \_\_\_\_\_

Pronouns (e.g., He/Him, She/Her, They/Them): \_\_\_\_\_

Student Email Address: \_\_\_\_\_

Home Address (include city, state, and zip code): \_\_\_\_\_

**Note:** Your address is only used to confirm your eligibility for this scholarship.

## PARENT/GUARDIAN INFORMATION

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Email: \_\_\_\_\_

**Note:** The Foundation will copy this email on all communications regarding your application.

## ACADEMIC INFORMATION

High School Name	Graduation Date (MM/YYYY)	Unweighted GPA

Are you involved in any extracurricular or community service activities? \_\_\_\_\_ Yes \_\_\_\_\_ No

If you answered yes to the above question, please list:

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Please enter the information for the institution you will be attending for the 2026-2027 academic year. If undecided, please enter your top two choices:

Institution Name	Institution Location	Anticipated Area of Study

Institution Name	Institution Location	Anticipated Area of Study

### ESSAY PROMPTS

Please respond to the following essay prompts separately. Each response should be **500 words or less**.

1. Describe a personal experience that influenced your decision to pursue a particular field of study.
2. How will this scholarship help you achieve your career goals? *When addressing this prompt, discuss your future career aspirations and how the scholarship will support your academic and professional pursuits. Highlight any relevant experiences, skills, or certifications that will contribute to your success.*
3. **OPTIONAL RESPONSE:** Please share any additional information you would like the scholarship committee to know about you and/or your background.

## RECOMMENDER INFORMATION

One recommendation letter is necessary to complete your application. The MHDFF will accept a **maximum of two** recommendation letters per applicant.

**Note:** Please let your recommender know that MHDFF will send a recommendation request within three (3) business days of your submission. **The letter of recommendation form closes at 11:59 PM ET on Friday, January 9, 2026.**

### Recommender 1:

Recommender First and Last Name: \_\_\_\_\_

Recommender Title: \_\_\_\_\_

Recommender Email Address: \_\_\_\_\_

Relationship to Applicant (e.g., sports coach, teacher): \_\_\_\_\_

### Recommender 2 (If Applicable):

Recommender First and Last Name: \_\_\_\_\_

Recommender Title: \_\_\_\_\_

Recommender Email Address: \_\_\_\_\_

Relationship to Applicant (e.g., sports coach, teacher): \_\_\_\_\_

## AUTHORIZATION

I hereby affirm that all of the information provided within this application is true and accurate to the best of my knowledge. I also affirm my understanding that incomplete or falsified applications will not be considered.

\_\_\_\_\_ Yes

\_\_\_\_\_ No

I agree to have my photo and name used in social media promotional materials (e.g., foundation website, LinkedIn, and Facebook).

\_\_\_\_\_ Yes, I agree to have my photo or name used on social media promotional materials.

\_\_\_\_\_ No, I do not agree to have my photo or name used on social media promotional materials.