

The Theodore R. And Vivian M. Johnson Scholarship Program

Theodore (Ted) R. Johnson joined United Parcel Service as an industrial engineer in 1923. He later became the first personnel manager and vice president of industrial relations. He retired in 1952. Ted and Vivian Johnson believed that higher education is essential, not only to the individual but also to the welfare and future of our country - that it leads to better leadership, higher ideals, a fuller life, and a deeper appreciation of social responsibility. The dreams and aspirations of young people to attain what they envision for their future will come from hard work and effort. The Foundation will assist by providing scholarships for those in need. Education will lead them to success and to their goals.

Among the programs and schools to be funded by the Foundation is The Theodore R. and Vivian M. Johnson Scholarship Program for dependent children of full-time or permanent part-time UPS employees and UPS retirees in Florida. Scholarships will be provided to qualified students who have an intense desire to continue their education and who need financial assistance to attain their goals.

The Theodore R. and Vivian M. Johnson Scholarship Program is administered by Scholarship Management Services, a department of Citizens' Scholarship Foundation of America, Inc. (CSFA). CSFA is a national nonprofit educational support and student aid service organization that seeks to involve and assist the private sector in expanding educational opportunities and encouraging educational achievement. Awards are granted without regard to race, color, creed, religion, gender, disability, or national origin.

ELIGIBILITY

The Theodore R. and Vivian M. Johnson Scholarship Program is open to dependent children of UPS employees who reside in Florida and who have completed at least one year as a regular full-time* or permanent part-time** employee as of the application deadline date and who remains an employee at the time the awards are announced.

*Regular full-time at UPS includes approved leaves of absence with or without compensation for military duty, holding union office, prolonged illness, maternity leave, and personal emergencies.

**A permanent part-time employee is someone who works 15 to 25 hours per week, fills a permanent vacancy and has successfully completed their probationary period. (Union employee – 30 work days and non-union employee – 30 calendar days.)

Also eligible are children of UPS retirees and children of deceased UPS employees. The employee-parent must have been employed with UPS up to the time of retirement or death.

Applicants may be high school seniors or graduates up to age 25 who plan to enroll or who are already enrolled in a full-time undergraduate course of study at an accredited two- or four-year college or university, or vocational-technical school in Florida. Students may attend a proprietary vocational school as long as the school is accredited.

Students may wish to spend the first two years in a Florida community college and receive an associate degree; however, applicants are strongly encouraged to complete their education leading to a baccalaureate degree at a four-year Florida institution.

AWARDS

Awards for students attending a four-year college or university range from \$500 to \$8,000 for one year of full-time study. Awards for students attending two-year colleges or vocational-technical schools range from \$500 to \$3,000 for one year of full-time study. Awards may be used for tuition, fees, books, and room and board. A small number of awards may exceed these amounts.

Awards may be used only for undergraduate study at post-secondary institutions in Florida. Awards for four-year schools are renewable for three additional years or until a bachelor's degree is earned, whichever occurs first. Awards for two-year and vocational-technical schools are renewable one time (twice for special circumstances). Two-year students who transfer to a four-year college with no delay are eligible to continue to apply for renewal. Renewal forms will be sent to eligible recipients in December.

APPLICATION PROCEDURE

Interested students must complete the attached application and mail it along with a current, complete transcript of grades to CSFA postmarked no later than **April 15**.

Applicants are responsible for gathering and submitting all necessary information. Applications are evaluated on the information supplied; therefore, it is important to answer all questions as completely as possible. All information received is considered confidential and is reviewed only by CSFA.

SELECTION OF RECIPIENTS

Scholarship recipients are selected solely by CSFA on the basis of the applicant's academic record, demonstrated leadership and participation in school and community activities, work experience, a statement of educational and career goals, unusual personal or family circumstances, and a recommendation.

CSFA individually evaluates each application using a system in which academic performance is weighted the same as nonacademic activities. Recipients are selected on a competitive basis; therefore, not all applicants may be recipients.

Financial need is a necessary factor in determining the amount of awards once recipients are chosen. Individual scholarship awards will be determined by CSFA based on the family's ability to contribute toward the educational expense of the school chosen by the student. Recipients must demonstrate need of \$500 or more as calculated by CSFA.

PAYMENT OF SCHOLARSHIPS

On behalf of The Theodore R. and Vivian M. Johnson Scholarship Foundation, CSFA will process scholarship awards in two equal installments. Recipients will be notified at their home address in early June of each year. Checks will be mailed in mid-August and late December and are payable jointly to the student and the school and must be endorsed by both.

OBLIGATIONS

Recipients have no obligation to The Theodore R. and Vivian M. Johnson Scholarship Foundation or to UPS. They are, however, required to supply to CSFA any changes of address, school enrollment, or other relevant information. Except as described in this brochure, no obligation is assumed by the Foundation or UPS.

REVISIONS

The Theodore R. and Vivian M. Johnson Scholarship Foundation reserves the right to review the conditions and procedures of this scholarship program and to make changes at any time including termination of the program.

ADDITIONAL INFORMATION

Questions regarding the scholarship program should be addressed to:

The Theodore R. and Vivian M. Johnson Scholarship Program
Scholarship Management Services, CSFA
1505 Riverview Road, P. O. Box 297
St. Peter, MN 56082

Telephone: (507) 931-1682

INSTRUCTIONS FOR COMPLETING THE FINANCIAL DATA SECTION OF THE APPLICATION

The Financial Data section of the application should be completed by the UPS (United Parcel Service) employee. Information should be from a completed tax return or based on estimated information to be filed with the IRS.

State of Residence is the state where the parents reside and pay state income tax.

Adjusted Gross Income can be found on IRS FORM 1040 and is gross income reduced by specific adjustments allowed by law.

Total Federal Tax Paid includes the total amount of federal income tax to be paid as reported on IRS FORM 1040. This is not the amount withheld from employer paychecks. (The amount withheld should be adjusted by any refund or additional taxes due.) Do not report state income tax.

Total Income earned should be reported for both parents from all W-2 forms received. If the student resides with only one parent, CSFA prefers to receive financial information from both natural parents, when possible. Financial information must be received from the UPS employee. If a parent has remarried, the spouse's information is required if the spouse is a legal guardian of the student, or claims the student as a dependent, or the student is included in the spouse's benefit plan. If necessary, two Financial Data sections may be submitted by the student. A copy of the Financial Data section may be made in order for one to be completed by each parent.

Untaxed Income and Benefits include any other income or benefits not included in the adjusted gross income figure.

Medical and Dental Expenses include only those expenses not paid by insurance. Do not include premium payments.

Total cash, checking, savings, cash value of stocks, etc., include liquid assets that can be used for educational expenses. Not included are IRA, 401K, or other retirement plan funds.

Total number of family members living in the household and primarily supported by the above income includes dependent college students living away from home.

Be sure to check the appropriate box giving the current marital status of the parents from whom the financial information is submitted. Include the total number of all family members attending post-secondary school at least half time. (Post-secondary includes any two- or four-year college or vocational school.) Be sure to include the applicant in this number.

NOTE: Any exceptions to providing financial information as instructed above must be submitted to CSFA in writing.

The Theodore R. and Vivian M. Johnson Scholarship Program

TYPE OR PRINT ALL INFORMATION EXCEPT SIGNATURES

Completeness and neatness insure your application will be reviewed properly.

Application postmark deadline April 15

FOR
CSFA USE
ONLY

I.D. #	AA	PD	RIC/CS	GPA	SATV	SATM	TOTAL

**APPLICANT
DATA**

Last Name _____ First _____ Middle Initial _____
 Permanent Home Mailing Address _____ Apartment # _____
 City _____ State Florida Zip Code _____
 Telephone (_____) _____ E-mail Address _____
 Social Security Number _____ Date of Birth: Month _____ Day _____ Year _____
 Please indicate your status. (For statistical purposes only) Male Female
 American Indian/Alaska Native Black/African American Native Hawaiian/Pacific Islander
 Asian Hispanic/Latino White
 Indicate where you obtained this application:
 High School College Employee's Job Site Internet Direct Mail

**UPS EMPLOYEE
PARENT
OR
GUARDIAN
INFORMATION**

Last Name _____ First _____ Middle Initial _____
 Social Security Number _____ Work Telephone (_____) _____
 Fax Number (_____) _____ E-mail Address _____
 Job Title _____ Department _____
 City _____ State _____ Full-time Permanent Part-time Retiree
 Relationship to Applicant _____ The applicant is a dependent of the employee Yes No

**HIGH
SCHOOL
DATA**

School Name _____ Graduation Date: Month _____ Year _____
 City _____ State _____ Telephone (_____) _____

**POST-
SECONDARY
SCHOOL
DATA**

Name of post-secondary school you plan to attend. (If unknown, please list in order of preference the schools to which you have applied.)
Use official school names. Do not use abbreviations.
 _____ City _____ State Florida
 _____ City _____ State Florida
 4 yr. College or University 2 yr. Community or Junior College
 Vocational-Technical School Other, explain _____
 Year in school **next** year: 1 2 3 4 5 or Graduate Study
 Major or course of study: _____ When do you expect to graduate: Month _____ Year _____
 Degree sought: Bachelor Associate Certificate Other _____
 Student will: live on campus live off campus commute from home

If space provided in any section is inadequate, you may continue on additional sheets of paper using the same format. DO NOT repeat information already reported on the application form. Your name, address and name of this scholarship program should be included on all attachments.

WORK EXPERIENCE

Describe your work experience during the **past four years** (e.g., food server, babysitting, lawn mowing, office work). Indicate dates of employment for each job and approximate **number of hours worked** each week. List amounts earned at each job.

Employer/Position	From - Mo/Yr	To - Mo/Yr	Hours per week	Amount Earned

ACTIVITIES, AWARDS AND HONORS

List all school activities in which you have participated during the **past four years** (e.g., student government, music, sports, etc.). List all community activities in which you have participated without pay during the **past four years** (e.g., Boy/Girl Scouts, hospital volunteer, Special Olympics). Note all special awards, honors and offices held. **Indicate whether high school or college activities.**

Activity	No. of Years Partic.	Special Awards, Honors	Offices Held	Activity	No. of Years Partic.	Special Awards, Honors	Offices Held

GOALS AND ASPIRATIONS

Make a brief statement or summary of your plans as they relate to your educational and career objectives and long-term goals.

UNUSUAL CIRCUMSTANCES

Please describe how and when any unusual family or personal circumstances have affected your achievement in school, work experience, or your participation in school and community activities.

APPLICANT APPRAISAL (REQUIRED)

This section is required and must be completed in the format provided. If incomplete, your application will not be evaluated. The section is to be completed by a high school or college counselor or advisor, an instructor, or a work supervisor who knows you well.

You have been asked to provide information in support of this application. Please give immediate and serious attention to the following statements. When complete, please return to applicant. If you prefer, photocopy this section and return to applicant in a sealed envelope. A letter of recommendation does not replace this section.

The applicant's choice of a post-secondary educational program is	<input type="checkbox"/> extremely appropriate	<input type="checkbox"/> very appropriate	<input type="checkbox"/> moderately appropriate	<input type="checkbox"/> inappropriate
The applicant's achievements reflect his/her ability	<input type="checkbox"/> extremely well	<input type="checkbox"/> very well	<input type="checkbox"/> moderately well	<input type="checkbox"/> not well
The applicant's ability to set realistic and attainable goals is	<input type="checkbox"/> excellent	<input type="checkbox"/> good	<input type="checkbox"/> fair	<input type="checkbox"/> poor
The quality of the applicant's commitment to school and/or community is	<input type="checkbox"/> excellent	<input type="checkbox"/> good	<input type="checkbox"/> fair	<input type="checkbox"/> poor
The applicant is able to seek, find, and use learning resources	<input type="checkbox"/> extremely well	<input type="checkbox"/> very well	<input type="checkbox"/> moderately well	<input type="checkbox"/> not well
The applicant demonstrates curiosity and initiative	<input type="checkbox"/> extremely well	<input type="checkbox"/> very well	<input type="checkbox"/> moderately well	<input type="checkbox"/> not well
The applicant demonstrates good problem-solving skills, follows through, and completes tasks	<input type="checkbox"/> extremely well	<input type="checkbox"/> very well	<input type="checkbox"/> moderately well	<input type="checkbox"/> not well
The applicant's respect for self and others is	<input type="checkbox"/> excellent	<input type="checkbox"/> good	<input type="checkbox"/> fair	<input type="checkbox"/> poor

Comments: _____

Appraiser's Name _____ Title _____ Telephone (_____) _____

Signature _____ Organization _____ Date _____

TRANSCRIPT INFORMATION

An official transcript of grades must be sent with this application. On-line transcripts and grade reports are not acceptable.

1. **Students currently or previously enrolled in college or vocational-technical school must** include all college or vo-tech transcripts of grades. (Completion of high school information is not necessary.)
2. **High school seniors and students who have completed less than one full quarter or semester** of post-secondary education **must** include a high school transcript of grades and have the following section completed by the appropriate school official. **(A clear explanation of the school's grading scale must also be submitted.)**

Applicant ranks _____ in a class of _____	Cumulative Grade Point Average Weighted: _____/4.0 scale Unweighted: _____/4.0 scale	PSAT Verbal Math	SAT 1 Verbal Math	ACT English Math
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School Official's Signature _____ Date _____ Title _____ Telephone (____) _____

School Official's Address: Street _____ City _____ State _____ Zip _____

PARENTS' FINANCIAL DATA (REQUIRED)

The UPS employee must complete this portion of the application. Adjusted gross income and total federal income tax amounts should be from parents' most recently filed tax return. **To be considered for an award, this section must be filled out completely.**

State of Residence Florida Total Cash, Checking, Savings, and Cash Value of Stocks (do not include retirement plan funds).....\$ _____

Adjusted Gross Income (FORM 1040)..... \$ _____ Total number of family members living in the household and primarily supported by the above income# _____

Total Federal Tax Paid(FORM 1040)..... \$ _____ Marital status of employee parent or guardian:
 Married Divorced Separated Widowed Single

Total Income of Father (from W-2)..... \$ _____ Total number of family members attending college at least half-time during the next school year, including applicant..... # _____

Total Income of Mother (from W-2)..... \$ _____

Yearly Untaxed Income and Benefits (Social Security, AFDC, Child Support, Other _____)..... \$ _____

Medical and Dental Expenses Not Paid by Insurance (do not include premiums)..... \$ _____

Refer to brochure for instructions to assist in completing this section.

OTHER AWARDS

Please list the name and annual amount of any grants or scholarships you have been awarded for the coming school year only.

Name of Award:	School to which award will be applied:	Amount	Check One
_____	_____	\$ _____	<input type="checkbox"/> Granted <input type="checkbox"/> Pending
_____	_____	\$ _____	<input type="checkbox"/> Granted <input type="checkbox"/> Pending

APPLICATION CHECKLIST

The student is responsible for submitting all materials to CSFA on time. This application for a scholarship becomes complete and valid only when CSFA has received all of the following materials:

- Student Application
- Current Complete Transcript(s) of Grades (including grading scale)
On-line transcripts are not acceptable.

All materials, including transcript, must be addressed to:

The Theodore R. and Vivian M. Johnson Scholarship Program
 Scholarship Management Services, CSFA
 1505 Riverview Road, P.O. Box 297
 St. Peter, MN 56082

Postmark deadline April 15

CERTIFICATION

Citizens' Scholarship Foundation of America, Inc. (CSFA) has the sole responsibility for selecting recipients based on criteria as set forth in the program's descriptive brochure. This application becomes the property of CSFA. (It is recommended that you keep a copy for your files.)

I acknowledge decisions of CSFA are final. I certify that I meet the basic eligibility requirements of the program as described in the brochure and that the information provided is complete and accurate to the best of my knowledge. If requested, I agree to provide proof of information I have given on this form, including a copy of my U. S. Income Tax Return. Falsification of information may result in termination of any scholarship granted.

Applicant's Signature _____ Date _____

UPS Employee's Signature _____ Date _____