

SCHOLARSHIP APPLICATION

Kansas Academy of Mathematics & Science

Academic Year 2025-2026

A copy of the KAMS student's parent(s)' most recent tax return (1040 Form) is required to complete this application.

Instructions: KAMS student complete sections A - E.

**Please type or print in ink.

Section

A GENERAL INFORMATION

Student name _____

Social Security number _____ Last - First Middle Date of birth ____/____/____

Gender _____

Permanent mailing address: _____

Address _____

City _____ County _____ State _____ Zip _____

Home Phone _____ Student Cell Phone _____

Student Email Address _____

Parent Names _____

Parent Email Addresses _____

Section

B SCHOOL INFORMATION

High school _____

High school address _____

Expected date of KAMS completion _____ month _____ year

PARENTAL FINANCIAL INFORMATION

Students & parents complete Section C. Refer to your parents' IRS tax return. Students: if your parents are divorced, have the parent (including stepparent if remarried) you lived with more in the last 12 months complete Section C. **Include a copy of your parent(s)' most recent tax return (1040 form) to complete this application. Application will not be processed without required tax forms.**

1. What is your parents' marital status as of today? Check one.	<input type="checkbox"/> Married or Remarried <input type="checkbox"/> Divorced or Separated	<input type="checkbox"/> Single <input type="checkbox"/> Widowed
2. What income tax return did your parent(s) file or will file for 2024? Check one.	<input type="checkbox"/> IRS 1040 <input type="checkbox"/> IRS 1040-SR	
3. In 2024, did you, your parent(s), or anyone in your household receive benefits from any of the government programs listed? Check all that apply.	<input type="checkbox"/> Unemployment Benefits <input type="checkbox"/> Supplemental Security Income <input type="checkbox"/> Free or Reduced Price School Lunch	
4. What was your parent(s)' adjusted gross income for 2024?	<input type="checkbox"/> Food Stamps <input type="checkbox"/> Temporary Assist for Needy Families (TANF) <input type="checkbox"/> Special Suppl. Nutrition Program for Women, Infants & Children (WIC)	
5. Enter the amount of your parent(s)' income tax for 2024	\$ <input type="text"/> Form 1040 – Line 11	
6. Enter your parent(s)' exemptions for 2024. (Exemptions are the number of people you claim on your tax return. This includes parents and dependents.)	<input type="text"/>	
7. Enter your parent(s)' number of family members for 2023-2024. Include in your parents' household: (1) your parents & yourself; and (2) your parents' other children if your parents provided more than half of their support between July 1, 2022 & June 30, 2024.	<input type="text"/>	
8. How many people in Question 9 will be college students between July 1, 2025 & June 30, 2026? Always include yourself (student). Do not include your parents. Include others only if they will attend at least half-time in a program that leads to a college degree or certificate in 2024-2025.	<input type="text"/>	

Additional Information Reviewed

In addition to this scholarship application and parent/guardian tax information, your KAMS application will also be reviewed. Information reviewed from KAMS applications may include: GPA, class rank, ACT/SAT scores, honors/awards/special recognition, activities, recommendations, and any other submitted KAMS admission application materials.

D

I wish to apply for the following scholarships:

Available Scholarships

☐

KAMS Scholarship

E

You are encouraged to provide any circumstantial information you wish for the selection committee to know and/or a statement explaining your need for scholarship assistance. You may attach a separate sheet, if needed.

This application will not be processed without prior admittance to KAMS.

Students & Parents/Guardians: The signature line below will validate the accuracy of this application and serve as permission for this application and the student's KAMS application to be released and reviewed by the KAMS Scholarship Selection Committee.

Applicant signature

Date

Parent signature

Date

Return this application and tax forms
by mail, email, or fax no later than
May 1, 2025 to:

Kansas Academy of Mathematics & Science
Marcy Bleske
600 Park St.
Hays, KS 67601

Email: mlbleske@fhsu.edu