

Kaela Marie Archambault Memorial Scholarship
Sponsored by KMA Foundation Inc.

Kaela Marie Archambault
(Keeping Memories Alive) Memorial Scholarship
2024

Eligibility:

- Currently a senior at _____ High School
- Committed to attending a college in the state of Missouri
- Completed application form submitted prior to April 20th, 2024.
- Planning to pursue a career in Nursing/Children's Medical Field, Childcare Field or Education
- Applicant must have a cumulative GPA of 2.75 or higher.

Regulations:

- Please type or print clearly.
- Completed applications are to be submitted to the Shawna@kmafoundation.org or mailing to KMA Foundation, 1560 Woodlake Dr. Chesterfield, MO 63017 by April 20th, 2024.
- Please attach (1) letters of recommendation and current Applications will be reviewed by the Kaela Marie Archambault Scholarship Committee.
- A scholarship will be guaranteed for a minimum of \$500.
- The scholarship recipients will be notified by email or phone by June 15, 2024.
- Individuals selected must provide proof of enrollment for post-secondary education by July 30th, 2024 to receive grant funds. Send copy to shawna@kmafoundation.org
- Grants funds will be mailed to awarded applicants after proof of enrollment has been received.

SCHOOL ACTIVITIES – List High School Clubs and Sports participation grades 9 – 12

NAME OF ORGANIZATION	GRADE
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

RECOGNITION/ACHIEVEMENTS: List awards and honors received grades 9- 12

_____	_____
_____	_____
_____	_____

STUDENT PROFILE: Please respond briefly to the following questions listed on this form or typed in essay form.

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In what ways do you help your family?

How have you made a positive difference at your high school in awareness for others and yourself when it comes to driving safely?

What will receiving the Kaela Marie Archambault Memorial Scholarship mean to you?

Why do you want to pursue a career in Nursing/Children's Medical Field or Childcare Field, or Education? What qualities do you possess that would make you a good candidate for this career?

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STUDENT INFORMATION:

Name: _____ Address: _____

City/State: _____ ZIP: _____ Telephone: _____

“I consent to the release of the information provided for the purpose of evaluation by the Kaela Marie Archambault Scholarship Committee or their appointed representatives.”

Signature: _____ Date: _____

Please email to shawna@kmafoundation.org or by mailing to KMA Foundation Inc., 1560 Woodlake Dr.
Chesterfield, MO 63017 April 20th, 2024.

THANK YOU FOR APPLYING FOR THE
2024 Kaela Marie Archambault Memorial Scholarship
Sponsored by KMA Foundation Inc.
Any Questions please call 636-442-1451