



# Fremont County and Boys and Girls Club of Fremont County

## Primary Scholarship Application

\$1000 Award with Potential COSI  
Matching Award

Deadline: April 16, 2026  
5:00 P.M.

Dear Student:

Thank you for your interest in the Boys and Girls Club Primary Scholarship and possible matching funds through the Colorado Opportunity Scholarship Initiative. Please complete all necessary information in this application packet and return to:

COSI Scholarship  
Fremont County Commissioners  
615 Macon Room 105  
Canon City, CO 81212

Scan/Email to: [wolfe.sww@gmail.com](mailto:wolfe.sww@gmail.com) or,  
[kathy.lutz@fremontcountyco.gov](mailto:kathy.lutz@fremontcountyco.gov) or,  
[dwayne.mcfall@fremontcountyco.gov](mailto:dwayne.mcfall@fremontcountyco.gov)

Applications may be delivered in person, sent via U.S mail, or emailed to one of the above. Applications must be received by the close of business on Thursday, **April 16, 2026**.

Please review the following list of guidelines before proceeding with the application. The selection process for all potential scholarship applicants is as follows:

1. The scholarship award will be \$1000, with a potential matching amount of \$1000.
2. The number of scholarships awarded is based strictly on funds available.
3. Scholarship funds will be awarded for **Fall 2026 semester** only.

All applicants will be notified of their status of the application (scholarship recipient or regrets) by May 15, 2026.

The County Commissioners and the BGCFC wish you luck with your educational endeavors and we look forward to helping you achieve your educational goals.

Sincerely,

*Mr. Steven Wolfe*

Coordinator, FCCOSI Scholarship

# 2026-2027 BGCFC Primary Scholarship Application

## SCHOLARSHIP ELIGIBILITY

- Applicants must be a current resident of Fremont County
- Applicants must be a first year or continuing postsecondary student
- Applicants must attend a Colorado institution of higher learning with an identified COSI Student Support Services program.
- Applicants must show they meet COSI eligibility by using the attached COSI Qualifying Worksheet
- Continuing post-secondary applicants must have a minimum 2.5 cumulative GPA

## REQUIREMENTS FOR MATCHING SCHOLARSHIP RECIPIENTS

- Student must be enrolled in at least twelve (12) credit hours and consistently maintain a 2.5 GPA
- Part-time students may be considered with a reduced award.
- Student must participate in a COSI approved student support program that assists with persistence and successful completion of a certificate or degree

## Required Application Supporting Documentation:

*Incomplete applications will not be considered.*

### ☐ Transcripts

Incoming freshmen must provide their most recent high school transcript.

Current postsecondary students must provide their most recent college transcript.

### ☐ SAR

- Front page of the 2026-2027 Student Aid Report – **Front Page with SAI number**  
(Print out provided after the FAFSA has been completed)
- **COSI Supplemental Qualification Worksheet**

### ☐ Typed Personal Essay (Minimum 500 words)

- State your educational, leadership and career goals and how you plan to achieve them.

### ☐ Current One-Page Resume

- Provide most recent school activities, internships, awards, personal accomplishments and community service involvement.

### ☐ Two Letters of Recommendation

- One letter should be from an educator who can address your aptitude and/or potential as a student.
- One letter should be from a community leader, employer, coach, mentor, etc.

# 2026-2027 Scholarship Application

Please type or print clearly in black or blue ink. Submit completed application packet by 5:00 pm on April 16, 2026 to:

COSI Scholarship  
Fremont County Commissioners  
615 Macon Room 105  
Canon City, CO 81212

Scan/Email to: [wolfe.sww@gmail.com](mailto:wolfe.sww@gmail.com) or,  
[kathy.lutz@fremontcountyco.gov](mailto:kathy.lutz@fremontcountyco.gov) or  
[dwayne.mcfall@fremontcountyco.gov](mailto:dwayne.mcfall@fremontcountyco.gov)

## Applicant Information (Incomplete application packets will not be processed)

Name: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

Phone: (    ) \_\_\_\_\_ Cell: (    ) \_\_\_\_\_ **DOB** \_\_\_\_\_

Email: \_\_\_\_\_ **SSN** \_\_\_\_\_

**Race/Ethnic Origin:** Hispanic ☐ White ☐ African American ☐ Asian ☐ Other: \_\_\_\_\_

**PELL Eligible** - Yes \_\_\_\_ No \_\_\_\_

## Education Information

High School Attended: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Year Graduated: \_\_\_\_\_

Your intended College/University: \_\_\_\_\_

Degree/Program/Certification: \_\_\_\_\_

Field of Study: \_\_\_\_\_

I do hereby consent to the release of information regarding my scholarships, academic and financial status (including photos) to Fremont County/Boys and Girls Club of Fremont County. I also consent to release any information for publication. All the information on this application and supporting documentation is true and complete to the best of my knowledge.

\_\_\_\_\_  
(Print full name)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

## Terms and Conditions of Scholarship Academic Year 2026-2027 Contract Agreement

Following are the terms and conditions which govern the receipt of the scholarship. You acknowledge that you have read and reviewed the following terms and conditions and that you agree to be bound by them. BGCFC reserves the right, in its sole discretion, to change these terms and conditions at any time without prior notice.

1. This Agreement constitutes the entire agreement between the parties pertaining to the subject matter hereof, and supersedes in their entirety any and all written or oral agreements previously existing between the parties with respect to such subject t matter.

**Student Initials:** \_\_\_\_\_

2. The terms and conditions of this Agreement may not be amended, supplemented, or altered by any other document(s) and any attempt to amend, supplement, or alter is null and void unless agreed to in writing by both parties.

**Student Initials:** \_\_\_\_\_

3. Scholarship recipients must maintain a minimum 2.5 cumulative GPA. Scholarship recipients must maintain at least 12 credit hours to receive this scholarship as an undergraduate. Some PCC/Community College programs may qualify with less than 12 credit hours.

**Student Initials:** \_\_\_\_\_

4. Scholarship Student must participate in an approved student support program offered by the college they attend that will assist with persistence and successful completion of a certificate or degree

**Student Initials:** \_\_\_\_\_

*I agree to abide by the terms and conditions of the Fremont County Contract Agreement and hereby consent to the release of information concerning my academic and financial status to the Boys and Girls Club of Fremont County.*

\_\_\_\_\_  
Student Name (Please Print)

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Fremont County Representative

\_\_\_\_\_  
Date

**COSI Supplemental Qualification Worksheet – all information will remain confidential**

Name \_\_\_\_\_ Date \_\_\_\_\_

SAI from FAFSA \_\_\_\_\_

To qualify for a COSI match, you must meet **one of the following qualifications:**

Please mark those that apply to you/your family and provide documentation for one:

- \_\_\_\_\_ Qualify for a Pell Grant award of any amount (from FAFSA or Federal Student Aid Estimator)
- \_\_\_\_\_ Eligible for Free and Reduced Lunch Benefits
- \_\_\_\_\_ Temporary Assistance to Needy Family (TANF) Benefits
- \_\_\_\_\_ Supplemental Nutrition Assistance Program (SNAP) Benefits
- \_\_\_\_\_ Medicaid Eligibility
- \_\_\_\_\_ Supplemental Security Income (SSI), or Disability Benefits
- \_\_\_\_\_ Sector 8 Housing Voucher
- \_\_\_\_\_ Women, Infants, and Children (WIC) Benefits
- \_\_\_\_\_ An income below the current federal income reporting level
- \_\_\_\_\_ Colorado Child Care Assistance Program

If you do not qualify using any of the criteria above, you can use the Dependent Student Guideline based on the Adjusted Gross Income (AGI) from your parent(s) 2023 or 2024 Federal Income Tax return. **Circle the AGI Limit that applies to you in the table below.** AGI must be less than the maximum amount shown below:

Parent Status \_\_\_\_\_ Family Size \_\_\_\_\_ AGI \_\_\_\_\_

	Single Parent	NOT a Single parent	
Family Size	COSI AGI Limit (250% of Pell Eligibility)	COSI AGI Limit (250% of Pell Eligibility	Eligible – Yes or No
2	\$148,770	\$125,882	
3	\$186,210	\$158,332	
4	\$225,470	\$190,832	
5	\$263,820	\$223,232	
6	\$302,170	\$255,682	
7	\$340,520	\$288,132	
8	\$378,870	\$320,582	