



## THE MADE WITH KINDNESS FOUNDATION PRESENTS THE MADE WITH KINDNESS SCHOLARSHIP APPLICATION

The Made With Kindness Scholarship fund stands as a beacon of hope and remembrance, honoring the lives of Madison Mogen and Xana Kernodle. This scholarship provides funds for graduating students from Kootenai County and Spokane County High Schools.

1. Applications will open up on February 1, 2026. The deadline for scholarship applications is April 1, 2026.
2. Please see criteria below for eligibility requirements and any other documents requested.
3. Scholarship recipients will be notified on April 17, 2026. The number of Scholarships awarded may vary. Scholarship ceremony will be held April 26, 2026.
4. If you have any questions about the scholarship process or application, please email [Madewithkindnessfoundation@gmail.com](mailto:Madewithkindnessfoundation@gmail.com), or call Founders Angela Navejas, 208-620-9350 or Ashlin Couch, 208-771-6209.

**Purpose:** The Made With Kindness Foundation aims to support students who exemplify dedication, ambition, and kindness in pursuing their educational dreams by offering scholarships up to \$2500.

**Our Mission:** The Made With Kindness Foundation is dedicated to honoring the memory and legacy of Madison Mogen and Xana Kernodle. As a beacon of hope, the foundation is guided by a commitment to kindness. Through scholarships, wellness support, and empowerment initiatives, our mission is to inspire and uplift the next generation, turning their dreams into realities in a world that values compassion and community.

**Selection Criteria:** Selection of the Made With Kindness Scholarship Fund will be based on several factors including involvement in high school, leadership, scholastic achievements, personal statements and references.

1. Must be a graduate from a Kootenai County or Spokane County High School.
2. Can attend any college within the United States.
3. Applicants must have a 3.0 GPA or higher.

**Scholarship recipients will be notified of their selection by April 17, 2026. Recipients will be selected by the Made With Kindness Foundation Committee. Upon verification of enrollment, awards will be issued directly to the designated college or university.**

**Each applicant will:**

1. Be a member of the graduating class from a Kootenai County or Spokane County High School.
2. Verify academic achievement by submitting a photocopy of transcripts for the last 3 semesters.
3. Show involvement in the community and/or school demonstrating leadership qualities.
4. Complete the application thoroughly.
5. Provide one letter of recommendation. Not from a family member. Preferably a high school teacher/counselor/mentor or employer.
6. An official transcript from recent high school with cumulative grade point average.

**Deadline for the application is April 1, 2026. Applications that are postmarked after this date will not be considered.**

Please email the completed application to [madewithkindnessfoundation@gmail.com](mailto:madewithkindnessfoundation@gmail.com) or mail your completed application to:

Made With Kindness Foundation  
PO Box 3118  
Hayden, ID 83835

Made With Kindness Foundation

## 2026 Scholarship Application

1. Recipients Last Name: \_\_\_\_\_ FirstName: \_\_\_\_\_
2. Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_
3. Contact Information: Email: \_\_\_\_\_
4. Phone Number: \_\_\_\_\_ Date Of Birth: \_\_\_\_\_
5. Parent or legal Guardian Names: \_\_\_\_\_
6. Parents Contact Information 1::  
Email \_\_\_\_\_ Phone Number \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code \_\_\_\_\_
7. Parents Contact Information 2:  
Email \_\_\_\_\_ Phone Number \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code \_\_\_\_\_
8. Current High School: \_\_\_\_\_ Number years attended: \_\_\_\_\_
9. Counselors Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Email Address: \_\_\_\_\_
10. Grade Point Average: Must include most recent transcripts: \_\_\_\_\_
11. Proposed Field of Study: \_\_\_\_\_
12. I will be attending the following college/university: \_\_\_\_\_  
Must have proof of acceptance or current enrollment for funds to be disbursed.
13. Please list any extra-curricular activities, community service, or any other civic involvement and dates that you were involved with them: \_\_\_\_\_

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14. Why are you applying for this scholarship?\_\_\_\_\_

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15. Please share a personal experience on how you made a difference in someone's life and showed kindness:\_\_\_\_\_

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The Following items must be attached to this application in order for the application to qualify.

1. One letter of recommendation.
2. Proof of college or university acceptance. If you are still waiting for acceptance, please let us know that it is pending.
3. Official high school transcripts.

I hereby certify that all the information provided in my scholarship application, including my academic achievements, extracurricular activities, and personal statements, is true, accurate, and complete to the best of my knowledge. I understand that any false or misleading information may result in the rejection of my application or revocation of any scholarship awarded. I also authorize the scholarship committee to verify the information provided through any necessary means. Thank you for considering my application.

acknowledge that if selected for the scholarship, I am required to furnish proof of enrollment/registration at the post-secondary institution prior to the disbursement of scholarship funds. I will be responsible for reaching out to the Made With Kindness Foundation with my institution's mailing address and tuition deadline to facilitate the distribution of funds.

I understand that the deadline for the application is April 1, 2026, and that applications postmarked after this date will not be considered. I understand that I may also email the completed application to: [madewithkindnessfoundation@gmail.com](mailto:madewithkindnessfoundation@gmail.com) OR mail completed applications with supporting documents to: Made With Kindness Foundation. Attn Scholarship Committee, PO Box 3118, Hayden ID 83835

Name of scholarship applicant:\_\_\_\_\_

Signature of scholarship applicant:\_\_\_\_\_Date:\_\_\_\_\_

Name of applicants parent/legal guardian:\_\_\_\_\_

Signature of applicants parent/legal guardian:\_\_\_\_\_Date:\_\_\_\_\_

Thank you for submitting your application. We look forward to reviewing.