



JAN 2017

LOCAL SCHOLARSHIP APPLICATION

Name:

Gender:

Birth date:

Address:

PARENT INFORMATION

Father's Name & Address (if different):

Father's Occupation & Employer:

Mother's Name & Address (if different):

Mother's Occupation & Employer:

STUDENT PROFILE

Class Rank _____ GPA (7th semester) _____

Clubs or sports and in which you have participated in:

Honors or awards you have been given:

Employment you have had in the past two years: Please list position, employer and numbers of hours worked.

Community Service activities in past 4 years:

EDUCATIONAL GOALS

School or College you wish to attend: _____

Career or major you wish to pursue: _____

- Estimate the cost of your expenses per year: (tuition, housing, food, books) _____
- What resources, besides financial aid, do you have to offset these costs? (Please list with dollar amounts)
- Has your family had emergency expenses during the past two years which will make it difficult for them to provide financial assistance? If "yes", please explain:
- Explain your educational goals and what you have done in high school that has helped you on this path.
- Explain how you intend to make a difference in the world with your future career.
- Why do you believe you are deserving of a scholarship award?

REFERENCES:

	<u>Name</u>	<u>Occupation</u>	<u>Phone number</u>
1.			
2.			

Authorization to release student information is hereby granted; further I affirm the accuracy of the foregoing information and my intention to use the scholarship award for no other purpose than to defray my educational expenses.

Student signature:

Parent signature:
(If under 18 years of age)