Part 2: Student Application

CODE#_____
(Use last 4 digits of phone number)

FINANCIAL INFORMATION

The annual cost of _____ college is

$ _____ as stated in catalog.

Tuition _____ Room _____

Board _____ Commuter costs _____
(If not living on campus)

I chose this institution because:

My educational and career goals are:

If you have *NOT* applied for financial aid, check the box below

☐ **I did *not* apply for financial aid.**

Financial aid

Scholarship _____ **Loans: Stafford _____**

Grants: PELL _____ **Perkins _____**

TAP _____ **Other _____**

College _____

PLEASE REMEMBER TO ATTACH REQUIRED DOCUMENTATION
(See instructions)

CODE#_____

SCHOOL AND COMMUNITY SERVICE (List your most significant). Limit to one page.

School Year (check)				Name of SCHOOL Club, Activity, Sport	Office or Position	Significant Contribution
9	10	11	12			
9	10	11	12			
9	10	11	12			
9	10	11	12			
9	10	11	12			
9	10	11	12			
School Year (check)				**Name of COMMUNITY Club, Activity, or Sport**	**Office or Position**	**Significant Contribution**
9	10	11	12			
9	10	11	12			
9	10	11	12			
9	10	11	12			
9	10	11	12			
9	10	11	12			

WORK EXPERIENCE

Employed By	Position	Employment Dates (mm/yy-mm/yy)		Hours per week	Rate of pay
		Start	End		

Any academic or extra-curricular honors or awards

CODE#_____

ACADEMIC INFORMATION

1. **Grade Point Average (6 Semesters) _____**

2. **SAT Reading/Writing _____ SAT Math _____**

If you did <u>not</u> take the SATs, check here ☐

3. **ACT Composite _____**

If you did <u>not</u> take the ACTs, check here ☐

FAMILY DATA

Is your father living: Yes___ No___

Occupation _____

Employed by_____

College attended _____

Degree _____

Is your mother living: Yes___ No___

Occupation _____

Employed by _____

College attended _____

Degree _____

If parents are divorced or separated, with whom do you live? _____

Does the family receive any non-taxable income? Yes____ No____

If yes, please explain.

SIBLINGS

Age	School Attending	Date of Graduation (if attending college)

CODE#_____

STUDENT PERSONAL STATEMENT (required). What other information about your circumstances or needs will help the committee to better evaluate your application? The committee will carefully read your application and make a decision. This committee considers more than academic achievement. To preserve anonymity please refrain from using identifying information, specifically your name. (Limit your answer to the space below.)

CODE#_____

PARENT/GUARDIAN STATEMENT (optional). Parents/guardians are encouraged to give the committee additional information as to why their child deserves this scholarship. To preserve anonymity, please do not mention your child by name.