

SCHOLARSHIP APPLICATION FOR HIGH SCHOOL SENIOR

Date: _____. (Application must be received by state chairman no later than Feb. 10, 2010)

Name in full: _____ **Phone:** _____

Home Address: _____ **City:** _____ **State:** ___ **Zip:** _____

Age: _____ **Female:** _____ **Male:** _____ **Social Security Number:** _____

Place of Birth: _____

Years resided in state: _____ **Parent or Guardian:** _____

Address: _____ **City:** _____ **State:** ___ **Zip:** _____

Phone: _____ **Parent or Guardian employment:** _____

Date of High School graduation: _____ **Scholastic average:** _____

Extra-curricular activities _____

College/University of Enrollment: _____

Address of Financial Aid Office: _____

City: _____ **State:** _____ **Zip:** _____

Intended Major: _____ **Intended Minor:** _____

How do you plan to finance your college education? Work ___ **Loans** ___ **Family Support** ___

Other _____

Signature of applicant: _____

STATEMENT OF FINANCIAL NEED

Please use this form to show all anticipated sources of funds and costs related to attending college this coming school year. Include scholarships. Ask Student Financial Aid Officer at the college of enrollment to complete the "Expenditures" section of this form. This information is held in strict confidence by the Scholarship Committee.

RESOURCES

EXPENDITURES

*If more than \$500, explain below:

Relatives, friends _____

Tuition & Fees _____

Savings _____

Housing _____

Summer earnings _____

Books, Supplies _____

School year earnings _____

Board (food) _____

*Loans _____

Transportation _____

*Other Sources _____

Clothing & laundry _____

*Miscellaneous _____

TOTAL: _____

TOTAL: _____

I, _____ authorize the Financial Aid Officer to release the estimate of the above expenditures.

Signature of Student _____ Date _____

Signature of Financial Aid Officer _____ Date _____