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| ***AFFIX Class Rank & GPA Label Here*** |

COMMON SCHOLARSHIP APPLICATION FORM

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*( Name of Scholarship)*

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **Date Completed:** | | |  | | | | | | | | **Stu ID#** | | | | | | | | | |  | |
| **Applicant Name:** | | | |  | | | | | | | | | | | **Birthdate:** | | | | |  | | |
| **Street Address:** | | | |  | | | | | | | | | | | **Phone #** | | | | |  | | |
| **Town/City:** | | |  | | | | | | | | | | **State:** | |  | | | | **Zip:** | |  | |
| **School you now attend:** | | | | |  | | | | | | | | | | | | | | | | | |
| **Are you currently employed?** | | | | | YES NO | | | | | | | | | Full Time  Part Time | | | | How long? | | | |  |
| Place of Employment: | | | | |  | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | |
| **Father’s/Guardian Name:** | | | | | |  | | | | | | | | | | | | | | | | |
| Address: | |  | | | | | | | | | | | | | | | | | | | | |
| *(only if different than student; please include city, state and zip)* | | | | | | | | | | | | | | | | | | | | |
| Place of Employment: | | | | |  | | | | | | | | | | | | | | | | | |
| Occupation: | | |  | | | | | | | | | | | Full Time  Part Time | | | | How long? | | | |  |
| **Mother’s/Guardian Name:** | | | | | |  | | | | | | | | | | | | | | | | |
| Address: | |  | | | | | | | | | | | | | | | | | | | | |
| *(only if different than student; please include city, state and zip)*: | | | | | | | | | | | | | | | | | | | | |
| Place of Employment: | | | | |  | | | | | | | | | | | | | | | | | |
| Occupation: | | |  | | | | | | | | | | | Full Time  Part Time | | | | How long? | | | |  |
|  | | | | | | | | | | | | | | | | | | | | | | |
| **Other dependents in the household (list names and ages):** | | | | | | | | | | | | | | | | | | | | | | |
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| **Do any of these dependents attend college?** | | | | | | | | | YES NO *If yes, how many?* | | | | | | | | | | | | | |
| **Will your parents assist you financially in continuing your education?** YES NO | | | | | | | | | | | | | | | | | | | | | | |
| **Will you receive other financial assistance (i.e. grants, scholarships, merit awards, etc.)?** YES NO | | | | | | | | | | | | | | | | | | | | | | |
| *If yes, please specify:* | | | | | | | | | | | | | | | | | | | | | | |
| **Applicant Name:**  ***(Common Application – Continued)*** | | | | | | | | | | | | | | | | | | | | | | |
| Intended College Major and/or Minor: | | | | | | |  | | | | | | | | | | | | | | | |
| Colleges applied to (in order of preference): | | | | | | | | | | | | | | | | | | | | | | |
| 1. |  | | | | | | | | | 2. | |  | | | | | | | | | | |
| 3. |  | | | | | | | | | 4. | |  | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | |

**\*\*\*\* Submit a RESUME with the following information:**

1. *Educational experience*
2. *Honors/awards*
3. *Community service/volunteer work*
4. *Work experience*

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| **ESSAY QUESTION** *(choose one)* |

A. Identify and describe a personal habit or idiosyncrasy, of any nature, that helps define you.

B. If you were to write the story of your life until now, what would you title it and why?

***\*****IF the scholarship requires additional information, please attach a separate sheet or enter it here:*

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| **Parental permission for release of information:** |  | |
|  | | *(Parent/Guardian Name-Used as Electronic Signature)* |
|  | | |
| *(parent/guardian email and/or phone number for verification)* | | |