



SCHOLARSHIP APPLICATION

APPLETON BRANCH

A. STUDENT INFORMATION

Name _____ Birth date _____

Home address _____ Phone _____

Current address _____ Email _____

High School _____ Year graduated _____

School currently attending _____

School attending next year _____

Class level next year (JR, SR, Graduate, Post-grad) _____

B. ACADEMIC INFORMATION

Cumulative GPA _____ Intended degree _____

Anticipated date of graduation _____ Enrolled full time? Yes _____ No _____

Scholastic honors received _____

C. FINANCIAL INFORMATION

1. Will you be declared as a dependent on another individual's tax form in the current calendar year?

Yes _____ No _____

If NO, skip to question 2.

IF YES, complete the following indicating for whom you will be a dependent:

_____ Parent: Father's occupation _____ Employer _____

_____ Mother's occupation _____ Employer _____

_____ Spouse: Spouse's occupation _____ Employer _____

Total number of dependents to be claimed on their tax form _____

Are any of those dependents also in college? Yes _____ No _____ How many? _____

Check the box below for the combined gross income of parents OR applicant & spouse:

\$20-35,000 _____ \$35-50,000 _____ \$50-75,000 _____ \$75-100,000 _____ More than \$100,000 _____

Other assets: Own home? Yes _____ No _____ Value & mortgage balance? _____

Stock portfolio, real estate, savings? _____

2. COMPLETE THE FOLLOWING if you plan to claim yourself on the current year's tax form.

Will you be totally self-supporting? Yes _____ No _____ Source of Income _____

Your last year's gross income from tax form _____ Source of income _____

3. Scholarships, grants & loans you have received in the past (include value) _____

4. Personal assets (savings, investments, etc.) _____

5. Did you apply for financial aid at the school you will be attending? Yes _____ No _____

FOLLOWING SECTION MUST BE COMPLETED BY FINANCIAL AID OFFICE

Anticipated cost of educational expense _____ living expenses _____

Other expenses _____ Total anticipated expenses _____

Total anticipated ability to pay (income, assets, loans, scholarships) _____

Computed financial need _____

OFFICIAL STAMP AND SIGNATURE OF FINANCIAL AID OFFICER

SIGNATURE _____ DATE _____

D. List any extracurricular and community service activities including your length of involvement.

E. ESSAY

Write an essay, 250 words or less, explaining your professional goals and how you plan to use your education.

Attach your essay to this application.

F. SIGNATURE _____ Date _____

A COMPLETE APPLICATION PACKET MUST BE RETURNED TO THE EDUCATIONAL FOUNDATION CHAIR

LISTED ON THE COVER LETTER BY APRIL15, 2021.