Applicant's Name	
Telephone Number	Email Address
Address	
Father's Name	Occupation
Mother's Name	Occupation
Number of Siblings	Ages
Are any immediate family i	members attending college? Y N (circle one)
If so, who and where?	
Where are you planning to	go to college?
What is your anticipated n	najor?
Have you applied for finan	cial aid? Y N (circle one)
Did you receive a financial	aid package? Y N Unsure (circle one)
Have you received any other	er scholarships? Y N Unsure (circle one)
If yes, please name the sch	nolarship(s) and the amount(s):
Are you employed? Y N (ci	rcle one) If so, where?
How many hours per week	do you work?

In what ways have you served your community? (You may also attach a
resume)

Please turn this application in to your School Counselor no later than April 12th, 2024.