

FIRST NAME \_\_\_\_\_

LAST NAME \_\_\_\_\_

Guidance Counselor: \_\_\_ Baletsa \_\_\_ Benecke \_\_\_ Passanisi \_\_\_ Pena \_\_\_ Wilkins \_\_\_ Zollo

## Lynn English High School Local Scholarship Application

**In order to be considered for local scholarships, you must return this form, fully completed, to your guidance counselor by Monday, April 27, 2020. You must also attach the following documents:**

- (1) copies of Acceptance Letter and Financial Aid Award Letter from the college you plan to attend,**
- (2) any document showing the cost of attendance, i.e., tuition, fees, room & board, etc.,**
- (3) the first page of your SAR (Student Aid Report) which you received after submitting your FAFSA to the federal government. ONLY attach the first page which includes your EFC.**
- (4) your guidance counselor will attach a transcript with 1<sup>st</sup>, 2<sup>nd</sup> & 3<sup>rd</sup> quarter grades**

Father's Job Title: \_\_\_\_\_ Mother's Job Title: \_\_\_\_\_

Father's Employer: \_\_\_\_\_ Mother's Employer: \_\_\_\_\_

Father's Income: \$ \_\_\_\_\_ Mother's Income: \$ \_\_\_\_\_

**Mother's & Father's Total Income = \$ \_\_\_\_\_**

**Expected Family Contribution (EFC) from SAR = \$ \_\_\_\_\_**

Elementary School: \_\_\_\_\_

Middle School: \_\_\_\_\_

Sibling: \_\_\_\_\_ Age: \_\_\_\_\_ School / Employer: \_\_\_\_\_

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College You Will Attend: \_\_\_\_\_

Major You Will Pursue (Write "Undeclared" If You Do Not Know): \_\_\_\_\_

College Tuition: \$ \_\_\_\_\_ per year Room & Board: \$ \_\_\_\_\_ per year

Books: \$ \_\_\_\_\_ per year Fees: \$ \_\_\_\_\_ per year

Race (i.e., White, Black, Hispanic, Asian): \_\_\_\_\_ ( Optional ) Male \_\_\_\_\_

Ethnicity (i.e., Irish, Dominican, Cambodian): \_\_\_\_\_ ( Optional ) Female \_\_\_\_\_

Religion (i.e., Catholic, Protestant, Jewish): \_\_\_\_\_ ( Optional )

Is either of your parents a military veteran or current member of the military? \_\_\_ Yes \_\_\_ No

Is either of your parents a member of a veteran's organization? \_\_\_ Yes \_\_\_ No

If "Yes," which organization(s)? \_\_\_\_\_

**TURN OVER TO COMPLETE THE OTHER SIDE**

## Extracurricular Activities

Name of Activity	9	10	11	12	Officer / Captain Position

<b>Honors, Prizes, Awards</b>
<b>Membership in Non-School Clubs, Teams, Organizations ( Include Parents' Memberships )</b>
<b>Special Skills, Hobbies, Talents, Summer Study Programs</b>
<b>Work Experience &amp; Community Service</b>

Student's Cell Phone: \_\_\_\_ - \_\_\_\_ - \_\_\_\_\_ Student's Email:

**REMINDER:** Must be fully completed, with attachments, and returned to your guidance counselor by Monday, April 27, 2020, or you will not be considered for local scholarships.