FIRST NAME _____ **LAST NAME** _____

Guidance Counselor: ___ Baletsa ___ Benecke ___ Flamer ___ Hart ___ Merz ___ Molea ___ Wilkins

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 8:00 AM, Tuesday, April 30, 2024. You must also attach the following documents:

(1) copy of the 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 1st, 2nd & 3rd 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: _____

Sibling: _____ Age: _____ School / Employer: _____

Sibling: _____ Age: _____ School / Employer: _____

Sibling: _____ Age: _____ School / Employer: _____

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

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

Student's Cell Phone: ____ - ____ - _____ Student's Email:

REMINDER: Must be fully completed, with attachments, and returned to your guidance counselor by 8:00 AM, Tuesday, April 30, 2024, or you will not be considered for local scholarships.