

B. Work Experience

Employer & Address	How long?	Type of Work	PT / FT ?
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

C. Family History (if living at home)

Father's Name: _____ Occupation: _____

Mother's Name: _____ Occupation: _____

Number of siblings: _____ Do any members of your family attend a post-high school institution?

___ Father ___ Mother Where? _____

___ Sibling(s) Where? _____

If on your own, describe your family situation:

D. Financial Data

Indicate Total Gross Income (both parents) as indicated on 1040 Tax Form: \$ _____

Anticipated expenses: (circle one) per semester per quarter

Tuition / Fees \$ _____ Books \$ _____

Living Expenses \$ _____ Other \$ _____

Have you filed the Free Application for Federal Student Aid (FAFSA)? Yes No
Estimated Family Contribution (EFC) from FAFSA? \$ _____

How much will your family contribute? \$ _____ How much you will contribute? \$ _____

Have you been awarded any financial assistance (loans, grants, local scholarships, etc)? Yes No
If Yes, how much? \$ _____

Indicate any unusual circumstances that may increase your need:

If you choose, make a statement about why the Scholarship Committee should consider you for an award:

_____	_____	_____	_____
signature of applicant	date	signature of parent(s)	date