



Scholarship Application

Name of Child: _____ Date of Birth: _____

School Year: _____ Class Entering: _____

Name of Parent: _____ Occupation: _____

Name of Parent: _____ Occupation: _____

Name and ages of other children and dependents in the family:

Total Family Income (please include salaries and other compensation, investments, securities,
and child support or alimony for the current year) : \$ _____

Please supply copies of the following documentation in support of your scholarship application: a copy of the most recent tax returns filed for all working adults in the household and current month pay stubs for all working adults in the household. Note that all information collected for the purpose of awarding scholarships will be kept strictly confidential by the Director.

Have any of your financial circumstances changed in the past year? Please explain:

Do you expect any of your financial circumstances to change during the year? Please explain:

Given your financial circumstances, what is the scholarship amount you are requesting?

\$ _____

Signature of Parents or Guardians: _____

Date: _____