

# COLLEGE CLUB OF FANWOOD-SCOTCH PLAINS

## SCHOLARSHIP APPLICATION

ACADEMIC YEAR 20 \_\_\_\_ - 20 \_\_\_\_

Eligibility criteria for scholarships offered by the College Club of Fanwood–Scotch Plains appear in the current LOCAL SCHOLARSHIP BOOKLET provided by and available in the Guidance Office of Scotch Plains-Fanwood High School. The assistance of parent(s) or guardian is suggested in helping the Applicant complete the application. Applications **must** be completed in full; incomplete/unsigned applications are **not** acceptable. The signatures of the Applicant and of a parent/guardian are required below to validate that the information provided is complete and accurate.

The decision on recipients is based **solely** on the application and the other materials requested. All information including financial data, academic performance, test scores, letter(s) of recommendation and the personal letter of the Applicant will be kept confidential.

**ACADEMIC/OTHER RECORDS:** Applicants should request a transcript from their High School Guidance Department (and College Records Department if presently attending college). Guidance Departments of local High Schools other than SPFHS and College Records Departments should **mail** the transcript to the Scholarship Chairperson, **to arrive** by the deadline date listed in the LOCAL SCHOLARSHIP BOOKLET.

**PERSONAL LETTER:** The Applicant must submit a personal letter with the application. It should include interests, hobbies, goals, special family circumstances (e.g., illness, job loss, unusual expenses, etc.) and why the applicant should be considered.

**LETTER(S) OF RECOMMENDATION:** A letter of recommendation is required from a Guidance Counsellor and/or a teacher (or professor, if Applicant is attending college). Additional letters (e.g., employers, clerics, scout leaders, etc.) are also accepted. All letters should be sent to the Scholarship Chairperson **by the deadline date** in the LOCAL SCHOLARSHIP BOOKLET.

**ACTIVITIES:** The Applicant should provide, on a separate page, a list of all activities in and out of school during high school and college years, including awards and honors received and offices held.

**REMINDERS:** Please read and complete the application carefully and in its entirety. Mail it, along with the personal letter, to the current Scholarship Chairperson (whose name and address appear in the LOCAL SCHOLARSHIP BOOKLET). All materials must be postmarked **on or before the stated deadline date**. Check the weight of the envelope at the Post Office to assure adequate postage. Material postmarked after the deadline date will not be accepted, nor will hand-delivered applications or those with postage due.

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF PARENT/GUARDIAN

\_\_\_\_\_  
DATE

**COLLEGE CLUB OF FANWOOD-SCOTCH PLAINS**  
**SCHOLARSHIP APPLICATION**  
**ACADEMIC YEAR 20\_\_ - 20\_\_**

**PLEASE PRINT OR TYPE**

Applicant's Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Town \_\_\_\_\_ Zip \_\_\_\_\_

Years in Community \_\_\_\_\_ High School Attended \_\_\_\_\_

Middle School \_\_\_\_\_ Elementary School \_\_\_\_\_

Current College and Year (if applicable) \_\_\_\_\_

Email address: \_\_\_\_\_

List **local** scholarships for which you are applying:

_____	_____
_____	_____
_____	_____
_____	_____

List **other** scholarships (Corporate/Business, College, Sorority, etc.) for which you are applying:

_____	_____
_____	_____
_____	_____

College(s) to which you have applied (or are currently attending); do not include rejections:

College	Accepted	Annual Cost (Tuition/Fees, Room/Board)
1.*		\$
2.		\$
3.		\$
4.		\$

\*First Choice

What is your current or intended major? \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

**FAMILY INFORMATION**

Parents:             Married         Separated         Divorced  
 Mother:             Single             Remarried         Widowed         Deceased  
 Father:             Single             Remarried         Widowed         Deceased

With whom do you reside?         Parents         Mother         Father         Other\*

\*Name & Relationship \_\_\_\_\_

	Father	Mother	Other (Guardian)
Name			
Age			
Employer			
Occupation/Position			
Yrs. in Present Position			
Education (no. of yrs):			
High School			
College			
Graduate School			
Degree			

Number of children in family (including applicant) \_\_\_\_\_ List below dependent children only:

Name	Age	Present School/College	Grade
1.			
2.			
3.			
4.			
5.			
List other dependent children on the reverse of this page.			

If other people depend on your parents for financial assistance, please provide:

Name	Relationship	Address
1.		
2.		
3.		
List others on the reverse of this page.		

Applicant's Name: \_\_\_\_\_

**FINANCIAL INFORMATION**

<b>Income</b>	<b>Father</b>	<b>Mother</b>	<b>Other (Guardian)</b>
Gross Annual Salary/Wages	\$ _____	\$ _____	\$ _____
Dividends & Interest	\$ _____	\$ _____	\$ _____
Pensions	\$ _____	\$ _____	\$ _____
Social Security	\$ _____	\$ _____	\$ _____
Alimony	\$ _____	\$ _____	\$ _____
Child Support	\$ _____	\$ _____	\$ _____
Rental Income	\$ _____	\$ _____	\$ _____
Other (specify)	\$ _____	\$ _____	\$ _____
<b>Totals:</b>	\$ _____	\$ _____	\$ _____
<b>Combined Total Income:</b>	\$ _____		

Who will contribute to your education?  Father  Mother  Self  Other: \_\_\_\_\_

Amount spent (tuition/fees, room & board) on **all** childrens' education (including nondependents):

Elementary	\$ _____	High School	\$ _____		
Middle School	\$ _____	College	\$ _____	<b>Total</b>	\$ _____

Amount of all scholarships and financial aid received by your family to date:

Scholarships (Local)	Name _____	\$ _____		
	Name _____	\$ _____		
(Other)	Name _____	\$ _____		
College Grants	\$ _____	Student Loans	\$ _____	
Work/Study	\$ _____	Other	\$ _____	<b>Total</b> \$ _____

**APPLICANT'S EMPLOYMENT RECORD**

<b>Employer</b>	<b>Nature of Work</b>	<b>Dates</b>	<b>Total Earned</b>	<b>Amt. Saved</b>
1.			\$ _____	\$ _____
2.			\$ _____	\$ _____
3.			\$ _____	\$ _____

Include self-employment. List additional employment experience on the reverse of this page.

Applicant's Name: \_\_\_\_\_

**APPLICANT'S PLAN FOR FINANCING EDUCATION NEXT YEAR**

Contribution	Applicant	Parent/Guardia	
College Cost (Tuition/Fees, Room/Board)			\$
From Earnings	\$	\$	
From Savings	\$	\$	
From Other Sources(specify)	\$	\$	
<b>Totals:</b>	\$	\$	
Total Family Contributions			\$
Additional Amount Needed			\$

Have you filed a Financial Aid Form for next year?     Yes     No

Will you accept a Guaranteed Student Loan?             Yes     No

\*If, at this time, you have received a Financial Aid Package for next year from college, please complete the following information:

Scholarships	\$ _____	Student Loans	\$ _____		
College Grants	\$ _____	Work Study	\$ _____	<b>Total</b>	\$ _____

\*If you receive a Financial Aid Package after submitting this application, please call the Scholarship Chairperson.

**Note:** The Committee may request page one of your parents' or guardians' Federal Income Tax Form. If no financial information is submitted, please attach a letter of explanation.