

Scholarship Name: _____

Marshall County Scholarship
COMMON APPLICATION 2019

Name _____ Phone # _____ Year of Graduation _____

Full Address (Street, City, State, Zip) _____

Social Security # _____ Date of Birth _____

Father's Name _____ Occupation _____

Mother's Name _____ Occupation _____

Number of Older Siblings _____ Number of Younger Siblings _____

List family members who are now in college or other post-high school education and who are partially or wholly supported by your parents. Also, indicate the year in which they will **end** their education.

University/Trade School you will be attending: _____

Type of Degree (2 yr, 4 yr, etc.): _____ Yearly Cost: _____

Major: _____ Occupation you wish to enter: _____

Are you employed outside of school? Yes No If yes, where? _____

Name of contact at place of employment: _____

What jobs have you held in the past? _____

Will you be employed this summer? Yes No If yes, where? _____

How will you be financing your college education? _____

Have you received any other financial aid or scholarships? Yes No

If so, to what extent

On a separate sheet of paper, please list:

Extracurricular activities in high school
Extracurricular activities out of high school
Community service
Honors and awards

Required Attachments

High school transcript

Please attach a separate sheet to write a statement of your background, educational goals, and any other information that might be helpful to the committees in selecting winners of the scholarships for which you are applying. (250 words maximum)

Please name two adult references: one an employee of your school, one from another source.

Name: _____ Phone: _____

Name: _____ Phone: _____

NOTE: SEVERAL LOCAL SCHOLARSHIPS HAVE SPECIALIZED ATTACHMENTS. PLEASE MAKE SURE YOU INCLUDE EVERYTHING REQUIRED FOR EACH AWARD FOR WHICH YOU ARE APPLYING.

CONSENT FOR RELEASE OF INFORMATION

I permit _____ High School to release information pertaining to my grade point average, class rank, financial aid status, and any other information pertinent to my scholarship applications to any individual and/or committee who is awarding local scholarship monies for which I have applied.

Signature of Student

Date

Signature of Parent/Guardian

Date

Email this document with necessary attachment(s) specific to the scholarship for which you are applying to info@marshallcountycf.org.