

Gulf Coast High School  
SCHOLARSHIP APPLICATION

Please type or print neatly in black ink.

PERSONAL INFORMATION

Name: \_\_\_\_\_ Soc Sec #: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

COLLEGE/POST-SECONDARY INFORMATION

Applied to: \_\_\_\_\_

\_\_\_\_\_

Accepted to: \_\_\_\_\_

Major/Program of Study: \_\_\_\_\_

Career Plans: \_\_\_\_\_

HIGH SCHOOL INFORMATION

List Activities, Awards, and Offices held: (May attach separate sheet)

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List Work Experience with dates:

\_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

\_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

\_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

List Community Service/Volunteer Activities with dates:

\_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_ Total Hours \_\_\_\_\_

\_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_ Total Hours \_\_\_\_\_

\_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_ Total Hours \_\_\_\_\_

PERSONAL STATEMENT

Using a separate sheet of paper, typed and double-spaced, state why you feel you merit consideration as an applicant for an award or scholarship. You may wish to include educational goals and any unusual circumstances (financial, personal, etc). Supply information, which may be of assistance in considering your application. Submit at least 100 words.

**FINANCIAL INFORMATION FOR SCHOLARSHIPS THAT REQUIRE FINANCIAL DISCLOSURE OR THOSE INDICATING FINANCIAL NEED.** (Complete with parent(s)/guardian.) **Please include a copy of parents' 1040 tax form.**

Father's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Place of Employment: \_\_\_\_\_ Phone: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Place of Employment: \_\_\_\_\_ Phone: \_\_\_\_\_

Guardian(s) Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Place of Employment: \_\_\_\_\_ Phone: \_\_\_\_\_

Parent(s) Marital Status:  Married  Separated  Divorced  Single

Number and Ages of Siblings: \_\_\_\_\_

Number of Children in College supported by parent(s)/guardian: \_\_\_\_\_

Person(s) responsible for applicant's financial support: \_\_\_\_\_

Have you filed a F.A.F.S.A. for Federal Grant eligibility?  Yes  No

Please complete the following:

	Parent(s)/Guardian	Student
Adjusted Gross Income		
Current amount in cash, savings account and checking account		
Other current income sources		

Unpaid Mortgage: \_\_\_\_\_ Monthly Rent: \_\_\_\_\_

Does the student work?  Yes  No

If yes, Place of Employment: \_\_\_\_\_ # Hours per wk: \_\_\_\_\_

Weekly Income: \_\_\_\_\_

Does the student have a car?  Yes  No

If yes, Make of Car: \_\_\_\_\_ Year of Car: \_\_\_\_\_

What is your plan to finance your student's education? (Explain any special circumstances. Use separate sheet if necessary).

Please indicate any scholarships or awards your student has received, excluding local community scholarships:

Annual cost of the post-secondary institution you plan to attend (including tuition, books, room & board, transportation, etc): \_\_\_\_\_

I authorize my high school to give the information on this scholarship application to committee(s) that will use the information to determine a recipient for an honors award or scholarship.

Student Signature: \_\_\_\_\_ Parent/Guardian Signature: \_\_\_\_\_