

BERMUDIAN SPRINGS EDUCATION ASSOCIATION SCHOLARSHIP APPLICATION

NAME:								
(last)	(first	t)	(middle)					
HOME ADDRESS: _		PHONI	E:					
		EMAII	. :					
DATE OF BIRTH:	_//	GENDI	ER:					
HIGH SCHOOL EXTRACURRICULAR ACTIVITY INVOLVEMENT: (If more space is needed for any of the following categories, please attach a separate sheet of paper.)								
YEAR(S) INVOLVED	ACTIVITY/ORGANIZ	ZATION NAME	OFFICE/POSITION HELD					
	,							
		-						
COMMUNITY SERVIC YEAR(S) INVOLVED	CE / OUTSIDE ORGANI ORGANIZATION NA		ITY INVOLVEMENT: TIME INVOLVED					
ACADEMIC ACHIEVE YEAR GRANTED	MENTS AND AWARDS AWARD NAME		MONETARY VALUE					

♦ Please attach a formal resume thoroughly detailing your involvement in all high school and outside organization activities as well as community service performed. Please, also include information regarding awards granted and employment experience details.

COL	LEGE / UNIVERSITY YOU WILL ATTEN	D:	
DAT	E OF ACCEPTANCE://	COURSE O	F STUDY:
©	Please attach a copy of the acceptance letter	er you received	from your college/university.
APPI	LICANT'S FAMILY INFORMATION:		
	Father's Name:		Living? Yes / No
	Mother's Name:	Living? Yes / No	
	Approximate annual income of parents from	Father \$	
			Mother \$
	Names of Siblings Living in your Household: Age:	Dependent?	Student? If so, give grade level.
		YES / NO	
		YES / NO	
		YES / NO	
	Are you (applicant) currently employed? Do you (applicant) currently contribute to family? YES / NO If yes, explain:		
	JICANT'S ESTIMATED COLLEGE FINAN ** Budget for first year	college expense	
	Vous current savings to be used for college		\$
0	Your current savings to be used for college expenses:		Φ.
	Immediate family contributions toward college expenses:		\$
0	Expected spring/summer vacation earnings		\$
0	Other scholarships, grants, financial awards		\$
Total '	value of your financial contributions toward	college expense	es: \$

APPLICANT'S COLLEGE EXPENSES: o College Tuition: o College Room and Board (if commuting from home, enter 0): If commuting, provide the one-way mileage to school each day.) Other Required Fees Charged by the College: Total Cost of Attendance: \$ Will you need to work during the fall and spring semesters of your freshman year to help pay for college expenses? YES / NO Other information concerning family status and financial condition which affects your need for scholarship aid: PERSONAL STATEMENT: Please attach a typed explanation on a separate page explaining why you have chosen to enter the field of education. Limit your explanation to one side of a page and attach it to this application. (Date) (Signature of Applicant) I have read this application as completed and, to the best of my knowledge and belief, declare that the information and answers provided are complete and correct. I approve of this

(Signature of Parent or Guardian)

Return this application to the Guidance Office by March 31.

application for a scholarship.

SCHOOL AUTHORITY ENDORSEMENT

(To be completed after the applicant files application with BSEA)

Applicant ranks	from the top in a graduating class of	students.
Other pertinent remarks:		
	·	
(Signature)	(Offic	ial Capacity)