

**SCHOLARSHIP ASSOCIATION OF WEST EASTON**

Must be resident of the Borough of West Easton for 18 months and a member of the graduating class of a local high school in order to be considered for this scholarship

**NAME OF APPLICANT** \_\_\_\_\_  
**DATE OF BIRTH** \_\_\_\_\_ **SEX** \_\_\_\_\_  
**ADDRESS** \_\_\_\_\_  
\_\_\_\_\_ **PHONE** \_\_\_\_\_

**FATHER'S NAME** \_\_\_\_\_

**MOTHER'S NAME** \_\_\_\_\_

**CERTIFICATION AND AUTHORIZATION - WE DECLARE THAT THE INFORMATION REPORTED ON THIS FORM IS TRUE, CORRECT AND COMPLETE TO THE BEST OF OUR KNOWLEDGE. WE AGREE TO THE USE OF THIS FORM BY THE SCHOLARSHIP ASSOCIATION TO ASSIST IN THE DETERMINATION OF FINANCIAL NEED RELATIVE TO THE SELECTION OF RECIPIENTS OF AWARDS, GRANTS, OR LOANS.**

**SIGNATURE OF STUDENT** \_\_\_\_\_

**SIGNATURE OF PARENTS** \_\_\_\_\_

\_\_\_\_\_

PLEASE PRINT OR TYPE- INFORMATION WILL BE CONSIDERED CONFIDENTIAL

COLLEGE YOU WILL ATTEND \_\_\_\_\_

WILL YOU LIVE AT SCHOOL OR COMMUTE \_\_\_\_\_

HAVE YOU RECEIVED NOTIFICATION OF ADMISSION      YES      NO

INTENDED MAJOR \_\_\_\_\_

SECONDARY \_\_\_\_\_

EXTRA CURRICULAR ACTIVITIES (GRADES 9-12, LIST GRADES IN WHICH YOU PARTICIPATED IN EACH ACTIVITY) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

SCHOOL OFFICES HELD AND/OR AWARDS RECEIVED \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

GRADE POINT AVERAGE \_\_\_\_\_      CLASS RANK \_\_\_\_\_

OTHER SCHOLARSHIPS, GRANTS OR LOANS (NAME & AMOUNT) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

HOW LONG HAVE YOU RESIDED IN WEST EASTON \_\_\_\_\_

PLEASE LIST ANY SPECIAL CIRCUMSTANCES OR ADDITIONAL INFORMATION PRETINENT TO THIS APPLICATION \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\*An optional "Letter of Recommendation" from a teacher, employer, or advisor, who is not related to you, will be accepted as part of this application.

FATHER'S OCCUPATION \_\_\_\_\_

EMPLOYER \_\_\_\_\_

MOTHER'S OCCUPATION \_\_\_\_\_

EMPLOYER \_\_\_\_\_

FAMILY INCOME BASED ON LAST YEAR'S INCOME TAX REPORT

\_\_\_\_\_ UNDER \$30,000

\_\_\_\_\_ \$30,000-\$39,999

\_\_\_\_\_ \$40,000-\$49,999

\_\_\_\_\_ \$50,000-\$59,999

\_\_\_\_\_ \$60,000-\$69,999

\_\_\_\_\_ \$70,000 & ABOVE

FIRST NAME AND AGE OF ALL SIBLINGS AT HOME (GIVE YEAR,  
MAJOR AND NAME OF SCHOOL FOR THOSE ATTENDING POST HIGH  
SCHOOL PROGRAMS) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_