

Slater High School
General Application for Scholarships
DUE IN THE COUNSELING OFFICE FEBRUARY 17

Date:

Name:

Parent or Guardian:

Parent or Guardian Address:

Father's Occupation:

Mother's Occupation:

Financial Need: Please explain to the committee your reason(s) for seeking financial assistance.

Total number of family members living at home
(total number of dependants in your family including yourself):

Children's names and ages:

Total number of children currently attending college:

College you plan to attend:

Location:

Have you applied?

Have you been accepted?

Have you submitted the Free Application for Federal Student Aid?

Estimated Annual Expenses:	
Tuition and Fees:	
Room and Board:	
Books and Supplies:	
Misc. Expenses (please list)	
TOTAL Estimated Expenses:	

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Estimated Resources:
(Scholarships, Awards,
Financial Aid, Veterans
Benefits, etc.)

Financial Aid	Value	Has it been granted?

Are you employed? If so, where?

Describe any work related activities that you perform regularly:

Briefly list school activities, clubs, or organizations (list number of years and any offices held):

Honors and Awards:

Community Service Performed:

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Briefly state your intended college major or area of study and your educational and career plans.

Are there any scholarships you do NOT wish to be considered for, or any groups you do NOT authorize to view this application?

By my signature, I authorize the Slater School District to release necessary information and the confidential use of my school records to the respective scholarship committees making selections for the scholarships for which I am applying.

Student Signature

Parent/Guardian Signature

Date