

**2011-2012 LOCAL 406 SCHOLARSHIP APPLICATION**

Student's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
(Last) (First) (Middle)

Address \_\_\_\_\_ Sex \_\_\_\_\_

State of Legal Residence \_\_\_\_\_ Soc. Sec. No. \_\_\_\_\_ Marital Status Single \_\_\_ Married \_\_\_

Graduation Date \_\_\_\_\_ High School Grade Point Average \_\_\_\_\_ Name of High School \_\_\_\_\_

Address of High School \_\_\_\_\_

High School Activities and Honors: (Use separate sheet of paper if necessary)

College or University you will attend \_\_\_\_\_

Name of Parent who is a Local 406 Member \_\_\_\_\_

Registration Number of Parent \_\_\_\_\_

Parent's Permanent Address \_\_\_\_\_

Other scholarships or financial aid for which you have qualified for 2011-2012 \_\_\_\_\_

Will you work during the summer of 2011? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, state the amount of your projected earnings. \$ \_\_\_\_\_

Will you work during the 2011-2012 school year? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, state the estimated school year income. \$ \_\_\_\_\_

Projected school budget for 2011-2012  
a. Tuition fees, books \_\_\_\_\_  
b. Room and board \_\_\_\_\_  
c. Child care \_\_\_\_\_  
d. Clothing and laundry \_\_\_\_\_  
e. Transportation \_\_\_\_\_  
f. Medical and dental \_\_\_\_\_  
g. Other \_\_\_\_\_  
Total \_\_\_\_\_

How much financial assistance will your parents give you for 2011-2012? \$ \_\_\_\_\_

During school, will you live at school? \_\_\_\_\_ or with parents? \_\_\_\_\_

If married, yes \_\_\_\_\_ or no \_\_\_\_\_, will your spouse contribute to your support?  
yes \_\_\_\_\_ no \_\_\_\_\_ If yes, how much? \_\_\_\_\_

State why you feel you should receive a scholarship (use additional paper if you wish):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_