

Check below:
 Need based scholarships
 Non-need based

Henry M. Gunn High School

Return
to Sara Bronstein
in the College Center

COMMUNITY SCHOLARSHIP APPLICATION

NAME OF APPLICANT: _____
Last First

ADDRESS _____
Street City State & Zip code

Social Security # _____ Telephone# _____ E-mail _____

Teacher Advisor: _____ GPA _____ (leave blank)

1st Choice College: _____ 2nd Choice College _____ Planned Major: _____

SAT I Scores: Math _____ Critical Reading _____ Writing _____ (LIST BEST SCORES FROM ANY TEST)

ACT: Composite Score: _____

•Are the student's natural or adoptive parents separated or divorced? (Please circle) YES NO

•Did either parent graduate from a 4 year college (Please circle) YES NO

•List other dependent children and dependent family members. State relationship and at which college, if any.

Name	Age	Relationship	College
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

•Employment (include hrs/wk, summer and/or after school): _____

•Contributions to the school and/or community: _____

•Awards, honors and other achievements: _____

•Future goals and ambitions: _____

FOR NEED-BASED APPLICANTS - PLEASE TURN OVER AND FILL OUT

Check below:
 Need based scholarships
 Non-need based

Henry M. Gunn High School

Return
to Sara Bronstein
in the College Center

COMMUNITY SCHOLARSHIP APPLICATION

FINANCIAL SECTION: FOR NEED-BASED SCHOLARSHIPS ONLY (Confidential)

Do you plan to file the FAFSA? (Please circle) YES NO

Father's name _____ Occupation _____

Employer (If self-employed, state nature of business): _____

2006 Gross Income earned: \$ _____

Mother's name _____ Occupation _____

Employer (If self-employed, state nature of business): _____

2006 Gross Income earned: \$ _____

Adjusted Gross Income of parent(s)/guardian(s): Father/Guardian \$ _____

(from 1040 form, Adjusted Gross Income for 2006) Mother/Guardian \$ _____

Joint Return \$ _____

Student 2006 Income (e.g., earnings, dividends & interest) \$ _____

Student Assets (e.g., trusts, individual savings) \$ _____

Other financial assistance (public, private) \$ _____

Please describe more fully any or specific financial circumstances that might have bearing on the applicant's financial need. It may be necessary to request a copy of your 1040 for certain scholarships.

The undersigned hereby consent to the release of all information on this application to organizations and others that may wish to provide scholarships.

Parent/Guardian Signature _____

Date _____

Parent/Guardian Signature _____

Date _____