

Application No. _____

**JOSEPH BARRY COUNCIL 2520
COLLEGE SCHOLARSHIP AWARD**
(Please Print Clearly)

STUDENTS FULL NAME _____

STUDENT'S ADDRESS _____

HOME TEL. NO. _____

FATHER'S NAME _____

HIGH SCHOOLS ATTENDED (9th through 12th grades)

NAME OF SCHOOL DATE OF ENTRANCE PERIOD ATTENDED

COLLEGE TO BE ATTENDED _____

Signature of Student

THIS APPLICATION WITH THE FOLLOWING PAGES ANNEXED HAS BEEN
REVIEWED AND THE STATEMENTS CONTAINED THEREIN ARE VERIFIED.

Signature of Member or Guardian
whose membership qualifies applicant

CERTIFICATION BY SCHOOL OFFICIAL

I certify that _____ whose signature

written above, is a candidate for graduation during the term ending in _____, 20 ____

in _____ --High School located in _____

City, Town or Village, State

Principal, Guidance Counselor, Grade Advisor

Application No. _____

STUDENT'S DATE OF BIRTH _____

ALL QUESTIONS RELATE TO ACTIVITIES
DURING HIGH SCHOOL ATTENDANCE

HONORS, AWARDS, and 4 YEAR AVERAGE (list dates):

EXTRA-CURRICULAR SCHOOL ACTIVITIES, OFFICES HELD, and AWARDS ETC.:
(Include: hobbies, sports, bands, clubs, church & community activities, list dates involved)

(Attach additional pages if needed)

Application No. _____

POSITIONS HELD IN GAINFUL EMPLOYMENT, AVERAGE TIME EMPLOYED EACH WEEK, EARNINGS, ETC. (List dates involved)

POSITIONS HELD IN VOLUNTARY EMPLOYMENT, AVERAGE TIME EMPLOYED EACH WEEK, (List dates involved)

NUMBER OF DEPENDANTS IN FAMILY AND AGES OF IT: (DO NOT USE NAMES OF THE CHILDREN, ONLY AGES.)

TOTAL FAMILY INCOME: Under \$15,000 _____ \$15,000-\$30,000 _____
\$30,000-\$40,000 _____ \$40,000-\$50,000 _____
\$50,000-\$75,000 _____ \$75,000-\$100,000 _____
\$100,000-\$150,000 _____ \$150,000-\$200,000 _____

TOTAL AMOUNT OF TUITIONS TO BE PAID BY FAMILY IN THE COMING SCHOLARSHIP YEAR _____

IS YOUR FATHER LIVING?

HAVE YOU REASON TO EXPECT SCHLORSHIP AID FROM ANY OTHER SOURCE?
IF SO, GIVE DETAILS

(Attach additional pages if needed)
