

## **ALICE SANTIN MEMORIAL SCHOLARSHIP**

1. Applicant must be a Palmer High School alumnus/graduate who has been out of school for at least one year.
2. The scholarship is open to anyone who is working toward a degree or is upgrading his or her skills.
3. Application forms may be obtained at the Superintendent's office.
4. Applications will be considered semi-annually and must be on file in the Counselor's Office by July 15th and/or December 15<sup>th</sup>.
5. Applicant must furnish the Endowment Fund advisory board a copy of his/her grades and show good scholastic progress.
6. Applicant must submit the financial form which demonstrates financial need for continuing education.
7. Payments will be made directly to the school.
8. The amount of the grant will not exceed \$250.00 and no more than two will be awarded in any one year.
9. If a student is a recipient for July, he will not be considered as a December applicant.

PLEASE TYPE

APPLICATION FOR PALMER SCHOOL ENDOWMENT FUND SCHOLARSHIP

SECTION A

NAME \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

SOCIAL SECURITY NUMBER \_\_\_\_\_ MARITAL STATUS \_\_\_\_\_

PARENTS OR SPOUSE'S NAME \_\_\_\_\_

WHAT SCHOOL DO YOU PLAN TO ATTEND \_\_\_\_\_

MAJOR \_\_\_\_\_ YEAR IN SCHOOL \_\_\_\_\_ GPA \_\_\_\_\_

SECTION B

WILL YOU NORMALLY LIVE WITH YOUR PARENTS WHILE ATTENDING SCHOOL? \_\_\_\_\_

TOTAL NUMBER IN PARENT'S HOUSEHOLD, INCLUDING YOU \_\_\_\_\_

WILL YOUR PARENTS CLAIM YOU AS AN INCOME TAX EXEMPTION? \_\_\_\_\_

SECTION C (FILL IN THIS SECTION IF MARRIED OR DIVORCED)

TOTAL NUMBER IN HOUSEHOLD, INCLUDING YOURSELF \_\_\_\_\_

AGES OF DEPENDENT CHILDREN \_\_\_\_\_

IF MARRIED, IS YOUR SPOUSE EMPLOYED? \_\_\_\_\_

BY WHOM? \_\_\_\_\_

SECTION D

ITEMIZE YOUR EXPECTED EXPENSES OF THIS YEAR'S EDUCATION

TUITION \_\_\_\_\_

BOOKS \_\_\_\_\_

BOARD & ROOM \_\_\_\_\_

SECTION E

ACCURATELY AND FULLY FILL OUT THE INFORMATION ON THE BACK SIDE.

THIS APPLICATION MUST BE ON FILE IN THE SUPERINTENDENT'S OFFICE BY JULY 15 OR DECEMBER 15 TO BE CONSIDERED AT THE JULY OR DECEMBER MEETING.

**\*\*PLEASE NOTE** – REQUIRED TYPEWRITTEN COVER LETTER SUBMITTED WITH THIS APPLICATION STATING REASON WHY YOU ARE APPLYING FOR THIS GRANT.

FINANCIAL INFORMATION

NOTE: DUE TO THE REQUIREMENTS OF THE PARTICULAR FOUNDATION FUND FROM WHICH YOUR GRANT MAY BE ALLOWED, WE WILL NEED TO HAVE CERTAIN FINANCIAL INFORMATION CONCERNING YOU OR YOUR FAMILY. PLEASE BE ASSURED THIS INFORMATION WILL BE HELD IN STRICT CONFIDENCE. IF UNMARRIED, FILL OUT BOTH COLUMNS. IF MARRIED OR DIVORCED, FILL OUT JUST THE RIGHT HAND SIDE.

INCOME AND EXPENSE INFORMATION (FROM PREVIOUS FISCAL YEAR)

	<u>PARENTS</u>	<u>STUDENT (&amp; SPOUSE)</u>
TOTAL NET INCOME	_____	_____
FEDERAL & STATE INCOME TAX PAID	_____	_____
OTHER TAXES PAID	_____	_____
MEDICAL & DENTAL EXPENSES PAID	_____	_____
INTEREST PAID	_____	_____
OTHER FINANCE CHARGES PAID	_____	_____
SOCIAL SECURITY BENEFITS	_____	_____
AID TO DEPENDENT CHILDREN	_____	_____
ALL OTHER INCOME (CHILD SUPPORT, DISABILITY, ETC.)	_____	_____
OTHER SCHOLARSHIPS OR GRANTS	_____	_____

ASSET INFORMATION

CASH, SAVINGS & CHECKING	_____	_____
REAL ESTATE	_____	_____
OTHER INVESTMENTS	_____	_____
NOTES PAYABLE	_____	_____
OPEN ACCOUNTS PAST DUE	_____	_____

I do solemnly swear that all of the information on this application is true and correct to the best of my knowledge.

\_\_\_\_\_  
Signature

Please note that you may be required to submit verification of both your grades and income tax return.