MAINLAND REGIONAL	
2024 In-House Scholarship App	lication FOR SENIORS
PART I - TO BE COMPELET	ED BY APPLICANT
Please print neatly.	
Your name:	
Name of award(s) for which you are applying:	
Your age:	
Your address:	
Your phone #:	
Your email address:	
Your email address: Your school counselor:	
Your email address: Your school counselor: Your GPA:	
Your age: Your address: Your phone #: Your email address: Your school counselor: Your SAT counselor: Your SAT Scores Reading: or ACT Composite Score:	Math:

Colleges where you have applied:		
College you plan to attend:		
Your anticipated course of study:		
Your anticipated future career: _		
What is the financial breakdown t	for the college you plan to attend?	
Tuition and fees:	Books and supplies:	
Room and board:	Transportation:	
Other (specify):		
Total cost for one year:		

List your hobbies or Extra Curricular activities both in and out of school including employment. (You may attach an additional sheet of paper or your resume/activity list.)

REQUIRED: Describe any adversity you have overcome during your school years. Separate sheet(s) of paper will be accepted.

PART II - TO BE COMPLETED BY APPLICANTS' FAMILY

Father	Mother
Name:	Name:
Address:	Address:
Employers Name and Address:	Employers Name and Address:
Position: Years there:	Position: Years there:
Dad, are you self-employed or the owner of a business?	Mom, are you self-employed or the owner of a business?
REQUIRED if applying for #3 FRIENDS OF THE LINWOOD LIBRARY ->	Write a paragraph reflecting your interest in English and Reading. (Separate sheet(s) of paper will be accepted.)