

Dayton High School Application for Scholarships 2016-17

These scholarships are available to high school students and home-schooled students. This scholarship application form **must be submitted to your DHS Counselors' Office**. See General Instructions below for additional information about completing this application. **You can find specific information about each scholarship in the DHS Counselors' Office.**

General Instructions to Applicant

1. Make a copy of this blank application and complete a draft copy first.
2. Return a typed or neatly printed application for each scholarship you sign up for to Mrs. Arevalo in the DHS Counseling Center by the deadline due date. This application is the first impression you will make upon those who award scholarships.
3. **Check the instructions of the scholarship provider concerning additional requirements.**

1. Personal Information

Full name of applicant _____ Nickname _____
Home telephone number _____ Email Address _____
Current home address _____
City _____ State _____ Zip _____
Number of years lived in Liberty County _____
Date of birth _____

2. Family Information

Mother's name _____
Occupation _____
Street address _____
City, ST, Zip _____
Phone number _____

Father's name _____
Occupation _____
Street address _____
City, ST, Zip _____
Phone number _____

Name and ages of siblings/other dependents. Indicate what school(s) they attend.

Name	Relationship	Age	School or college/years attended
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

3. Education

- a. How many years do you plan to attend college and what course of study would you like to pursue? _____

- b. What future business or educational career will you likely pursue after finishing college? _____

- c. What college(s) would you most like to attend?

- d. What colleges have you applied for admission? Please indicate acceptance status. _____

4. Employment History

List jobs you have held in the last three years.

Employer	Dates	Hours per week	Position	Salary
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

5. Financial Need Summary

- a. Complete this section regarding Estimated Combined Net Income of you, your parent(s) or guardian(s) for the current year.
- | Name of person | Yearly income | Total annual income |
|----------------|---------------|---------------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
- b. Have you filed a (FAFSA) (Free Application for Federal Student Aid)? If so, please submit the amount of your EFC (expected family contribution).

- c. Describe any circumstances that may affect your ability to pay for your college tuition.

6. Please attach a written composition (in your own handwriting) of about 150 words or less stating your overall plans for the future, specifying career goals and how you plan to accomplish your goals.

7. Attach Current Resume

8. Transcript History

This section is to be verified by your counselor. Attach an unofficial transcript of your high school record to this sheet.

Ranking in senior class: _____ of _____

GPA: _____ on a 5.0 wtd. scale

Best Combined SAT Score: Date _____ Score _____
Verbal _____ Math _____ Writing _____

Best ACT Score: Date _____ Score _____

Signature of principal or guidance counselor _____

I do state the above information is accurate to the best of my knowledge.

Signature of Applicant _____

Date _____

NOTE: These Generic Scholarship applications **must be submitted to Mrs. Arevalo in the DHS Counseling Center.**

