## ALABAMA FEDERATION OF BUSINESS AND PROFESSIONAL WOMEN'S CLUBS, INC. APPLICATION FOR GIFT SCHOLARSHIP (PURSUING A BACHELOR DEGREE)

FORM HS-3

NOTE: For use by High School seniors ONLY

Name

(YELLOW PAGES)

TO BE CONSIDERED, APPLICATIONS MUST BE COMPLETED IN EVERY DETAIL AND ALL ENCLOSURES MUST BE ATTACHED.

Information concerning applicant:					Attach alocay print (any size)		
Name	Telephone Nur	mber	_	Attach glossy print (any size)  Black & White or Color			
TTGTT-C		refeptione Number			Black & White or Color		
Present Addresss:	Street	City, State	Zip				
Present Addresss:	Street	City, State	Zip	_			
Date and Place of Birt	th						
High School from whi	ich you graduated and da	ate.					
Attach transcript from the							
List any scholastic dis	tinctions or honors you r	nay have won:					
. Information conce	erning applicant's	family or g	uardian	:			
. Father (if living) or gua	ardian:			b.	Mother (if living) or guardian:		
Name					Name		
Occupation				Ì	Occupation		
Name and Address of Em	ployer				Name and Address of Employer		
Education					Education		
. Name/ages of brothers a	nd sisters at home (if any	/):					
. Total combined annual fa	amily income (attach For	m 1040):					
. Any unusual family finan	cial burden (explain fully	:					
. If parents separated, with	n which parent do you liv	re?		-			
. Information conce	erning applicant's	college pla	ns:				
. What are your ACT or SA	T scores?						
Attach results of the test	and mark ENCLOSURE 2						
. What Alabama college do	you plan to attend?						
Date term will			lajor/Minor	r: .			
<ol> <li>List in order of preference</li> <li>1.</li> </ol>	e the careers you are mo		sidering:	2.			
l. List below the sources fro			elp defray	col			
Scholarships							
Name					Amount		
Grants							
Name					Amount		
Grants							

Amount