

Rockport Garden Club High School Scholarship Application

First Name: _____ Last Name: _____

Home Address: _____

(Street #, Street Address, City & Zipcode)

Telephone Number: _____

Email Address: _____

Guardian #1 Full Name: _____

Guardian #1 Occupation: _____

Guardian #2 Full Name: _____

Guardian #2 Occupation: _____

Number of your siblings: __

Ages of your siblings: _____

Number in your household, (including yourself) attending college in 2020-2021

Volunteer work performed: _____

Employment History: _____

(Starting with your most recent employment, list any jobs that you have held (include approximate dates of employment, name of business and position held))

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College/Career Expenses

Cumulative GPA? _____

Post-Secondary plan? (Check all that apply) **Gap Year:** If you plan to take a gap year after graduation you are not eligible to apply for the Rockport Garden Club Scholarship this year. However, you are welcome to apply for this scholarship when your gap year is winding down and you are applying to a post-secondary educational program.

- College
- Career
- United States Armed Forces
- Other..._____

If College, please include your Major or Area of Study. If Career, please include Field or Area of Interest. If United States Armed Forces, please identify the Branch.

Schools or programs you have been accepted: _____

Name of the school or program you plan to attend: _____

Tuition cost: _____ Room and Board: _____

Fees: _____ Book cost: _____

Transportation costs: _____ (If commuting from home)

Other expenses: _____

TOTAL Cost: _____ Total Cost to attend planned school or program

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METHODS FOR MEETING FINANCIAL NEEDS

Amount of Scholarships/Aid Awards/Merits provided to you from the school or program you plan to attend: _____

Amount of Scholarships/Awards provided to you from outside sources, not affiliated with the College or Program or the RHS Scholarships: _____
(if known at this time)

Do you plan to apply for any of the following?: (check all that apply)

- Federal Aid (FAFSA)
- College Work Study
- Employment
- Not applying for Financial Aid

Your EFC: _____
(Estimated Family Contribution - from your FAFSA SAR Report)

Your personal savings to date: _____

Your estimated Summer 2020 earnings: _____

Total amount of funding:
(as listed above toward the college or program you plan to attend)

STUDENT SIGNATURE: _____ *Date:* _____

GUARDIAN SIGNATURE: _____ *Date:* _____

