



## Connecticut School Buildings and Grounds Association

### 2020 Scholarship Application Directions

In order to be considered for one of the CSBGA scholarships you must complete pages 1 through 3 of the application and return it by May 1, 2020. In addition, your guidance counselor or admissions officer must complete page 4.

It is particularly important that you oversee the process for the completion of page 4, since the guidance and admissions offices often are not timely in submitting these. Place your name on the line and give this to your guidance or admissions counselor as soon as possible. Follow up with them to make sure that they have filled it out and submitted it. **Your scholarship application cannot be processed without page 4 being submitted on time.**

Good luck on your application submittal!

**Connecticut School Buildings and Grounds Association**

**Scholarship Application**

Name \_\_\_\_\_ Date \_\_\_\_\_

Street address \_\_\_\_\_

City/ Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email address \_\_\_\_\_ Home phone \_\_\_\_\_ Cell phone \_\_\_\_\_

Child/grandchild/legal dependent of which CSBGA member? \_\_\_\_\_

**Family information/Financial Need**

Father's name \_\_\_\_\_ Occupation \_\_\_\_\_

Father's Employer \_\_\_\_\_

Mother's name \_\_\_\_\_ Occupation \_\_\_\_\_

Mother's Employer \_\_\_\_\_

Please check the range of income to indicate your family's adjusted gross income from their **2019 tax return:**

- |                            |                            |
|----------------------------|----------------------------|
| _____ under \$55,000       | _____ \$70,001 to \$75,000 |
| _____ \$55,001 to \$60,000 | _____ \$75,001 to \$80,000 |
| _____ \$60,001 to \$65,000 | _____ over \$80,000        |
| _____ \$65,001 to \$70,000 |                            |

Number of dependent in your parent's family, including you:

Children \_\_\_\_\_ Ages \_\_\_\_\_ No. attending college \_\_\_\_\_

Please list names of siblings in college/post-secondary school

Name \_\_\_\_\_ School \_\_\_\_\_

Name \_\_\_\_\_ School \_\_\_\_\_

Name \_\_\_\_\_ School \_\_\_\_\_

Other financial considerations which need to be noted:

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**If you are now attending college:**

Name of College \_\_\_\_\_ Yearly tuition \_\_\_\_\_

**If you are not yet attending college:**

List colleges to which you have applied, as well as their tuition costs.

1. \_\_\_\_\_ Yearly tuition \_\_\_\_\_

2. \_\_\_\_\_ Yearly tuition \_\_\_\_\_

3. \_\_\_\_\_ Yearly tuition \_\_\_\_\_

**Extracurricular:**

List any extracurricular activities in which you have participated over the past four years.  
Please show the number of years of involvement and any offices held.

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List any honors and awards you have received over the past four years:

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List any community activities in which you have participated over the past four years:

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Are you presently employed? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If yes, what type of work and how many hours per week?

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Describe your other work activities, such as family farm, helping at home, or family business:

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**On a separate sheet** please describe in 75 words or less, and in your **own handwriting**, why you want to be a recipient of a CSBGA Scholarship, the course of study or major field of interest you plan to follow, your proposed occupation or profession, and any other abilities you have that were not previously mentioned in this application.

The completed application must be **postmarked by May 1, 2020** and mailed to the address below. ***No email applications will be accepted.***

Claudio Bazzano  
CSBGA Scholarship Program Director  
106 Bascom Road  
Lebanon, CT 06249

# Connecticut School Buildings and Grounds Association

## Scholarship Information

**Directions to the student:**

You and your parent/guardian must fill out the top of the form. Then ask your guidance counselor or admissions officer to provide the information requested. Return this form with the completed application by **May 1, 2020**.

Student Name \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_

Parent's/Guardian Name \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_

**Directions to the Counselor/Admission Officer:**

Please provide CSBGA with the following information, based on records retained in the school/college files:

1. College entrance examination combined score (SAT) \_\_\_\_\_

2. Note any honors or outstanding achievements:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Attach a current transcript for this student.

Counselor's/Admission Officer's Name \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_

The completed form with transcript attached must be **postmarked by May 1, 2020** and mailed to:

Claudio Bazzano  
CSBGA Scholarship Program Director  
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Lebanon, CT 06249