

**ATHOL HIGH SCHOOL SCHOLARSHIP ASSOCIATION
APPLICATION FORM – A.H.S. CLASS OF 2023**

**RETURN THIS COMPLETED APPLICATION WITH A TRANSCRIPT AND ACTIVITY SHEET
BY April 15th TO: MRS. HUGHES IN THE GUIDANCE OFFICE.**

Name: _____
(First - No nicknames, please) (M.I.) (Last) Phone #

Mailing Address: _____
Number and Street – or P.O. Box City State Zip Code

Field of Study: _____ College ID if available _____

Name of college you will attend: _____

Address of the college: _____
(Address of the business office at the college) City State Zip Code

Number of years you will attend: 2 ___ 4 ___ other ___ Year of college graduation: _____

- Annual income of father \$ _____
- Place of employment: _____

- Annual income of mother \$ _____
- Place of employment: _____

TOTAL ANNUAL INCOME: \$ _____

ESTIMATED YEARLY EXPENSES (COLLEGE COSTS) \$ _____
(INCLUDE: tuition, fees, room, board, books, supplies,
transportation and personal expenses)

A. How much do you expect to earn for your educational needs during this calendar year? \$ _____

B. How much will your parents be able to contribute? \$ _____

C. Other funds available for your education (scholarships, grants, relatives, etc.) \$ _____

TOTAL OF A, B & C \$ _____

D. **AMOUNT OF NEED** (Subtract total of A, B & C from college costs) \$ _____

(over) →

(over) →

(over) →

- How much do you expect to borrow in loans for your education next year? _____
- Total number of family attending college next year (**include yourself**) _____
- Number of brothers and sisters in Athol/Royalston schools next year _____
- Total number in family at home next year (**include yourself**) _____
- Do **you** have any dependent children? _____ If yes, how many? _____
- Do you plan to major in music? yes____ no____
- Do you plan to major in art? yes____ no____
- Did you ever attend Sanders St. School? yes____ no____
- Is a parent or relative a member of the American Legion? yes ____ no ____

Name _____ Relationship _____

Scholarships will be awarded to full-time students who are enrolled in undergraduate degree programs. To qualify as a full-time student you must earn a minimum of 12 credits per semester.

***INCOMPLETE APPLICATIONS OR APPLICATIONS WITHOUT
TRANSCRIPTS WILL NOT RECEIVE CONSIDERATION!***

On a separate sheet of paper, please type a brief description of your career plans and reasons for your need of scholarship assistance. Indicate any circumstances that present an unusual hardship to your ability to meet college or school expenses.

Please also include a brief overview of any community service.

***RETURN THIS COMPLETED APPLICATION DIRECTLY TO MRS HUGHES
IN THE GUIDANCE OFFICE ON OR BEFORE APRIL 15TH.***