Name of Scholarship Rank in class: _____ Name: Town/Zip: Address: Father's Name: ____ Occupation: Occupation: Mother's Name: Home Phone: Parent's total income: Post Secondary school you plan to attend: Program you plan to study: Number of brothers & sisters living at home: How many of your brothers/sisters are currently attending post-secondary institution: **College Expenses:** Tuition and fees Room and board if living on campus Other (specify) **Resources:** Student's contribution from savings and summer work Parent's contribution Scholarships and grants received College work-study received Total Resources: EFC (Estimated Family Contribution from you SAR) I certify that the above information is true and accurate to the best of my knowledge Parent/guardian signature Student signature Sign here if you did not file a FAFSA

Complete Other Side >>>

Additional Student Info

Academic honors you have received (attach additional sheet if necessary):		
Extracurricular act	ivities (attach additional sheet if neces	sary):
Work History:		
Job	Employer	Dates
*		

Return this application with the following:

- First Page of the Student Aid Report (SAR)
- Financial Package from College/University you plan to attend

Criteria for the selection of local scholarship recipients and disbursement of the awards are established by the organizations which make them possible. The Guidance Department at Somersworth High School and Career Technical Center serves only as a contact and processing component of this program.