

ID#
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**APPLICANT DATA**

*DO NOT put anything in the ID box. This is the ONLY page that should show your name.*

Name (last) \_\_\_\_\_ (first) \_\_\_\_\_ (middle initial) \_\_\_\_\_

Permanent Address (street) \_\_\_\_\_ (city) \_\_\_\_\_ (state) \_\_\_\_\_ (zip) \_\_\_\_\_

Date of Birth: (month/day/year) \_\_\_\_\_ Telephone Number \_\_\_\_\_ Male - Female \_\_\_\_\_

Email Address: \_\_\_\_\_

Name of parent/guardian: \_\_\_\_\_ # of children living at home \_\_\_\_\_

Permanent mailing address of parent/guardian if different from applicant:

(street) \_\_\_\_\_ (city) \_\_\_\_\_ (state) \_\_\_\_\_ (zip) \_\_\_\_\_

Telephone Number \_\_\_\_\_ e-mail address \_\_\_\_\_

**SCHOOL DATA**

High School Attended: \_\_\_\_\_ Graduation Date (month, year): \_\_\_\_\_

Name of post-secondary school for which applicant's scholarship is requested: \_\_\_\_\_

\_\_\_ 4 yr. College/University \_\_\_ Community College \_\_\_ Technical College

Address: \_\_\_\_\_

(street) \_\_\_\_\_ (city) \_\_\_\_\_ (state) \_\_\_\_\_ (zip) \_\_\_\_\_

Anticipated field of study \_\_\_\_\_

**OTHER AWARDS**

List below the name & amount of any **scholarships** (not need-based grants) that you have been awarded for the coming school year.

Name of Award	Amount	Name of Award	Amount

**FINANCIAL AID OFFER**

Have you received an offer of financial aid from the school you will be attending? \_\_\_ YES \_\_\_ NO

If YES, please list the items of the offer:

TYPE OF AID (grant/loan/work study) \_\_\_\_\_ Amount \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Estimated annual family contribution: (ONLY complete this portion if you are applying for financial need-based scholarships)**

Check the box that matches the approximate annual "take-home" income of your family:

<input type="checkbox"/> Under \$35,000	<input type="checkbox"/> \$35,000 - \$50,000	<input type="checkbox"/> \$50,000 to 70,000	<input type="checkbox"/> Over \$70,000
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What is the projected annual cost of the school you plan to attend? \_\_\_\_\_  
(Tuition plus Room & Board & Books, etc.)

Estimated annual family contribution towards your education: \$ \_\_\_\_\_

**PERSONAL DATA**

List all **school activities** in which you have actively participated during the **past 4 years** (e.g., student government, music, sports, clubs, etc.). Your list is limited to the number of spaces provided so please prioritize your activities and list those most important to you.

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School Activity	Grade Level of Participation				Awards, Honors, Offices held
	9	10	11	12	

List all **community organizations** in which you have participated during the **past 4 years during the school year only** (e.g., club sports, Scouts, church youth group, Boys & Girls Club, etc.)

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Community Organizations	Grade Level of Participation				Awards, Honors, Offices held
	9	10	11	12	

List **community service/volunteer** activities in which you participated without pay during the **past 4 years during the school year only**. List the total number of hours for each activity. (Do not include your 20 hours required for the culminating project.)

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Volunteer Activities	Grade Level of Participation				Volunteer Hours
	9	10	11	12	

List your **Paid work experience** outside of the home over the past 4 years **during the school year only**.

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Grade Level	Employer(s)	Position(s)	Total # of hrs worked during the school year only
9			
10			
11			
12			

**PERSONAL DATA** (continued)

*Please answer questions in the space provided. Do NOT attach additional pages.*

- 1) Prepare a statement of your plans as they relate to your educational and career objectives and future goals. What impact do you anticipate you will have on your community after completing your education?**

**OPTIONAL:** (NOTE: *This portion is given no points. However, your responses may be used to determine final award decision.*)

- 1. If, during high school, you encountered difficulties or unique circumstances that you feel affected your academic record or your ability to participate in extra curricular activities, employment opportunities or community service, please explain below.**
  
- 2. Several scholarships specify financial need as a criteria. IF you feel you qualify for financial need scholarships, provide a brief statement describing your need for scholarship funds. Please indicate all sources of financial support you hope to receive.**

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Recommendation (Required)

To be completed by a high school counselor, teacher or administrator.

Instructions to Recommender:

- You have been asked to provide information in support of this application for scholarship funds. **Bellingham Dollars for Scholars seeks to provide scholarships to students who demonstrate consistent integrity and strong character.** Please give immediate and serious attention to the following statements.
- To ensure completely unbiased review from the scholarship review committee, **DO NOT name the student** when writing your recommendation! Do NOT send an additional letter of recommendation.
- When this form is complete, please return to applicant or Career Center in a sealed envelope with the student's name listed on the OUTSIDE of the envelope only. Return to applicant or Career Center by **Wed, March 30, 2011, by 2:30 p.m.**

The quality of the applicant's commitment to school and community is

- excellent                       good                                       fair                                       poor

The applicant demonstrates initiative

- extremely well                       very well                                       moderately well                       not well

The applicant demonstrates good problem-solving skills, follows through and completes tasks

- extremely well                       very well                                       moderately well                       not well

The applicant's respect for self and others is

- excellent                                       good     fair     poor

The applicant's efforts/choices in the area of character and integrity are

- excellent                                       good     fair     poor

Optional Further Comments: (Do not name student. Do NOT attach and additional letter.) Is there any additional information that you feel that would differentiate this student from other capable applicants?

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Recommender's Signature                      Date                                      Title                                      (telephone number)

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Recommender's Address                      (street)                                      (city)                                      (state)                                      (zip)

**TRANSCRIPT & TEST INFORMATION**

**Official high school transcript -- Applicants must include an Official Transcript.**

Please ask the appropriate school representative (secretary or counselor) to sign below verifying the accuracy of the information. You do NOT need to include a copy of your Permanent Record.

**Test Information:**

**SAT** Composite Score \_\_\_\_\_

**ACT** Composite Score \_\_\_\_\_

**Cumulative grade point average at the end of 1st Semester 2010/11** \_\_\_\_\_/4.0 scale

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School Official's Signature	Title	Date

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**Certification:** In submitting this application, I/WE certify that the information (including the financial information on p. 2 and the financial statement at the bottom of p. 3) provided is complete and accurate to the best of my/our knowledge. Falsification of information may result in termination of any scholarship granted.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**APPLICATION CHECKLIST**

This application for scholarship funds becomes complete and valid only when the following materials have been returned to your high school Career Center.

- Application (all sections completed)
- Current Official Transcript of Grades
- All required signatures
- Recommendation form (if returned to you)
- Cover Sheet – listing ONLY the scholarships for which you are CERTAIN you meet the specific criteria**
- Addenda – required for a few scholarships**

**Due Date: Wed, March 30, 2011 by 2:30 p.m.**