

NASCOE SCHOLARSHIP APPLICATION

PERSONAL INFORMATION

NAME: _____ SOC. SEC. NO. _____

ADDRESS: _____ PHONE NO.() _____

_____ Email Address: _____

FATHER: _____ OCCUPATION: _____
(GUARDIAN)

ADDRESS: _____ COMPANY: _____

MOTHER: _____ OCCUPATION: _____
(GUARDIAN)

ADDRESS: _____ COMPANY: _____

WHICH FAMILY MEMBER IS A NASCOE MEMBER? _____

FSA County Office telephone number of NASCOE member: (_____) _____

As a **NASCOE** (*circle one*) member/parent/guardian,
I certify that for the past 5 consecutive years
or since becoming a permanent ASCS/FSA employee,
I have been a member in good standing, including
the current year.

I certify that the above **NASCOE** member has been
a paid member for the past 5 consecutive years
or since becoming a permanent ASCS/FSA employee,
including the current year.

SIGNED: _____

SIGNED: _____

NASCOE State Secretary

WORK EXPERIENCE:

Do you intend to work prior to and during the summers of your college career? _____

If no, why? _____

LIST PREVIOUS WORK EXPERIENCE:

DATE(S) OF EMPLOYMENT		JOB TITLE	JOB DESCRIPTION	RATE OF PAY \$ per HR	
From Mo/Yr	To Mo/Yr			Begin	End

SCHOLASTIC CAREER: High School

School(s) Attended: _____

Dates Attended: _____

Graduation Date: _____

Final Grade Point Average (using 4.0 system): _____

HAVE YOU APPLIED FOR ADMISSION TO A COLLEGE UNIVERSITY/TRADE SCHOOL? _____

	APPLIED		ACCEPTED	
	Yes	No	Yes	No
COLLEGE/UNIVERSITY/TRADE SCHOOL				

SCHOLASTIC CAREER: College/University/Trade School

School(s) Attended: _____

Dates Attended: _____

Grade Point Average (using 4.0 system) _____

Have you declared a major field of study? If so, what is it and write a paragraph explaining why you have chosen this particular field?

SCHOLASTIC HONORS:

Please list any scholastic honors and/or awards. Briefly describe the honor or award (i.e., Ronald C. Harben Award; award given to the person with the highest grade point average in natural resources). Include any money received through the award.

Please list any memberships in scholastic organizations and include any office or position of leadership held. Briefly describe the organization (i.e., Vice-President of Key Club {members of Key Club are chosen for their high academic achievement and leadership ability}).

SCHOOL-RELATED EXTRACURRICULAR ACTIVITIES:

YEAR	NAME OF ACTIVITY	NATURE OF ACTIVITY	OFFICE HELD: IF SO, WHAT?	AWARDS OR HONORS

NON-SCHOOL RELATED COMMUNITY SERVICE ACTIVITIES:

YEAR	NAME OF ACTIVITY	NATURE OF ACTIVITY	OFFICE HELD: IF SO, WHAT?	AWARDS OR HONORS

STUDENT'S FINANCIAL STATUS FOR THE COMING YEAR:

ESTIMATED EXPENSES:	ESTIMATED FUNDS:
Tuition and Fees:	Funds Available:
Books and Supplies::	Summer Earnings
Room and Board:	Parental Aid:
Clothing:	Scholarships:
Travel:	Savings:
OTHER (List):	OTHER (List):
TOTAL EXPENSES:	TOTAL FUNDS:
TOTAL AMOUNT NEEDED TO BALANCE:	

Include any additional information to show financial need and any other consideration in your budget that has not been mentioned. Include any additional information to show general worthiness; be concise and specific!

THE RECIPIENT OF THE SCHOLARSHIP MUST SATISFACTORILY COMPLETE AT LEAST ONE SEMESTER OF COLLEGE/UNIVERSITY/TRADE SCHOOL OR RETURN THE MONEY!

ACKNOWLEDGED: _____ Date _____

Applicant's Signature

FINANCIAL ANALYSIS

INCOME: Father/Guardian's Annual Income before taxes: _____

Mother/Guardian's Annual Income before taxes: _____

Equity in Home: _____

Net Profit of Farm or Business: _____

Value/Bank Accounts, Stocks, Bonds, CD's, etc.: _____

All other income not included above
(Pensions, Social Security, Alimony, etc.): _____

EXPENSES: Medical/Dental expenses not covered by Insurance: _____

Emergency Expenses (fire, flood, etc. - EXPLAIN): _____

No. of Dependents Living at Home: _____ No. of Dependents Attending College: _____

Please explain any unusual circumstances that would have a bearing on the ability to pay for the applicant's education.

I ATTEST TO THE VALIDITY OF THE ABOVE FINANCIAL REPORT. FALSE, ERRONEOUS, MISLEADING, OR OMITTED INFORMATION MAY BE GROUNDS FOR DISQUALIFICATION OF THE APPLICANT!

SIGNED: _____
Parent(s)/Guardian(s)

_____ Date