

Alyssa Cooper Memorial Scholarship

Please type or print your answers. If application is illegible it will be returned to you.					
1.	Last Name:	First Name:			
2.	Mailing Address:: Street: _____ City: _____ State: _____ ZIP: _____				
3.	Daytime Telephone Number: () _____				
4.	Date of Birth: Month Day Year				
5.	Current High School:				Number of years attended:
6.	I will be attending the following school in the <u>Fall of 2016</u> _____ Proof of acceptance or current student enrollment from the above school is required prior to receipt of funds.				
7.	I will be entering the above-mentioned school as a: (Circle one) Freshman Sophomore				
8.	Grade Point Average (GPA): _____ (On a 4.0 scale) Attach proof of GPA. Your most recent official school transcript required.				
9.	ACT Score: _____ Or SAT Score: _____ A copy of your ACT or SAT score sheet on official high school transcript is required.				
10.	Name & address of parent(s) or legal guardian(s): Use reverse side of application if you need more space. Name (s) _____ Street: _____ City: _____ State: _____ ZIP: _____ Home phone of parents or legal guardians: _____				
11.	Name and city of other high schools attended:				Number of years attended:
12.	List the name of any college you have attended.	Year Began	Year Ended	Year Graduated (if applicable)	Type of Degree Received (if applicable)
	A.				
	B.				
	C.				
13.	What specialty/major do you plan to major in as you continue your education?				

14.	List expenses you expect to incur per semester or quarter: (Approximate figures acceptable)		
	A.	Tuition:	Amount: \$
	B.	Books:	Amount: \$
	C.	Room & Board:	Amount: \$
	D.	Other expenses:	Amount: \$ Describe below under comments
	E.	Other expenses:	Amount: \$
Comments:			
15.	List other financial assistance you will receive per semester or quarter:		
	A.	Personal:	Amount: \$
	B.	Other Scholarship(s):	Amount: \$ Describe below under comments
	C.	Grants:	Amount: \$
	C.	Student Loan(s):	Amount: \$
	D.	Other Financial Resources:	Amount: \$
Comments:			

Use an additional sheet if you need more room to list financial information requested in items 14 & 15.

16.	List your academic honors, awards and membership activities while in high school or college:
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17.	List your community service activities, hobbies, outside interests, and extracurricular activities:
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Academic Questions:

18. What are your short term career goals? (Example: One to five years after graduation):

19. What are your long term career goals? (Example: Ten years from now):

20. What unique circumstances make you an ideal scholarship candidate compared to the other applicants?

24. **Personal Essay**
 Please answer the following question:
How have you worked in your life to make a positive difference? Explain your financial circumstances and why this scholarship would be best fit for you.
 Type a 1 page essay that best answers the about essay topic.

25.	<p>A. The following items must be attached to this application in order for the application to qualify to be reviewed by the scholarship committee.</p> <p>B. Your application will be returned to you if these items are not attached to this application. (No exceptions.)</p> <p>C. Circle "YES" or "NO" to be sure you have attached each item as required.</p>		
	YES	NO	Three (3) reference forms. Return these completed forms in a sealed envelope from your teachers or professors.
	YES	NO	Proof of college acceptance or current student enrollment. A letter of college acceptance or program acceptance is required for receipt of funds.
	YES	NO	Most recent <u>official</u> high school or <u>official</u> college transcript. Photocopies of your transcript are not acceptable .
	YES	NO	Personal Essay. How have you worked in your life to make a positive difference? Explain your financial circumstances and why this scholarship would be best fit for you.

The deadline for this application to be turned into Mrs. Craig by Friday, April 29, 2010