| Applicant Information | | | | | | |
|--|------------------------|-------------|---------|-------------------------|--|--|
| First Name: | Middle Initial: Last N | | Last N | lame: | | |
| High School Name: | | | | | | |
| Home Address: | | | | | | |
| City: | State: | | | ZIP Code: | | |
| Student Email Address: | | | | Phone #: | | |
| Parent/ Guardian Name: | | | | Phone #: | | |
| Status | | | | | | |
| I am currently a senior, with an anticipated graduation date of June 2019: <u>Yes</u> or <u>No</u> | | | | | | |
| Have you taken the ACT or SAT? Yes or No ACT Score: SAT Score: | | | | | | |
| G.P.A (unweighted): G.P.A (weighted): | | | | | | |
| Favorite Subject: | | | | | | |
| Organization/Club Affiliations | | | | | | |
| List any clubs, organizations, or extra-curricular activities you are involved in. | | | | | | |
| 1) | | | | | | |
| 2) | | | | | | |
| 3) | | | | | | |
| Community Service | | | | | | |
| List any organizations that you have volunteered with. Be sure to include a description of services. | | | | | | |
| Name of Organization: | Total Hours: | Description | of Serv | ices and/or Activities: | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

| College/University | | | | | |
|---|---------------|--|--|--|--|
| List below the colleges and/or universities you have applied to or been accepted to. | | | | | |
| 1) | City & State: | | | | |
| 2) | City & State: | | | | |
| 3) | City & State: | | | | |
| In the box below, state your intended major or area of study: | | | | | |
| | | | | | |
| Financial Assistance | | | | | |
| If applicable, please list all other sources of financial assistance that you will receive for college. | | | | | |
| Examples include: scholarships, grants, prepaid college fund, 529 college fund, etc. | | | | | |
| 1) | | | | | |
| 2) | | | | | |
| 3) | | | | | |
| Additional Information | | | | | |
| If needed, please use the space provided below to further answer any of the previous questions. | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |