

**APPLICATION FOR
BETHEL PARK KIWANIS MEMORIAL SCHOLARSHIP
ANNUAL SCHOLARSHIP AWARD
(ONE WINNER)**

AMOUNT: \$ _____ .00

REQUIREMENTS:

- a. Award to be made on combination of:
Need, Scholastic Standing and Extracurricular Activities.
- b. Graduating Senior, Bethel Park High School
- c. Has applied for entrance to post-high school education
- d. All applications for Award to be submitted through the Office of the Guidance Counselor
- e. Deadline for return of application: _____
- f. **A Student Aid Report (SAR) from FAFSA must be submitted to the Pittsburgh Foundation if you win and this FAFSA form must be returned to Mr. Bruce in the Counseling Office.**

1. Birthdate _____ Male _____ Female _____

2. Parents – Check if living
Mother _____ Father _____ Divorced _____ Separated _____ Mother’s Age _____
Father’s Age _____ Stepmother _____ Stepfather _____ Separated _____

3. Please list all children in family and indicate financial support they received during the _____ last year.
List student applicant first.

Age Only	If in school Public or Private	Name of School	Scholarship Aid Received	Total Support from Family
_____	_____	_____	_____	_____

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____

(List additional ages of Children on back of first page.)

4. List other dependents receiving support
Age Relationship to Applicant Living with Family Total Support from Parents

5. Will student (applicant) have car available for use during school year.
 Yes _____ No _____
6. Please estimate the amount you can pay toward school expenses, first year and four years.
 Parents: 1st Year _____ 4 Years _____
 Student: 1st Year _____ 4 Years _____
7. What schools have you applied to and approximate cost per year—tuition, room and board fees?

<u>School</u>	<u>Cost</u>	<u>Accepted</u>

8. Estimate the financial aid you may receive from other sources.

<u>Amount</u>	<u>Source</u>

9. Do you have a job for this coming summer? Yes _____ No _____
 Expected earnings: _____
10. List extra-curricular activities: School, Community, Church and positions held.

11. List any academic achievement recognition: _____

12. List your chief interest outside of school: _____

13. What is your purpose in wanting to continue your education? _____

14. Date _____

CODE # _____

To be filled in by school counselor

SAT Scores _____

Counselor _____

CODE # _____

To be filled in by Applicant and detached from
Form by Counselor before submitting to Committee

Student Applicant Name _____
(Last Name) (First Name) (Initial)

Student Home Address _____

Name of Parents or Guardian _____

Home Address _____

I certify that these answers are true and correct to the best of my knowledge:

Father or Guardian

Mother or Guardian

Student's Signature

Date