

St. Augustine High School General Scholarship Application

Class Rank _____

G. P. A. _____

SAT Scores _____

ACT Scores _____

Name of Scholarship _____

Applicant's Name _____ U.S. Citizen () Yes () No Resident Alien () Yes () No

Father's Name _____ Occupation _____ Yearly Income _____

Mother's Name _____ Occupation _____ Yearly Income _____

Guardian's Name _____ Occupation _____ Yearly Income _____

If Parents receive public funds, please specify amount(s): Retirement _____ Pension _____

Welfare _____ or AFDC Benefits _____ Other _____ Total all source income _____

Parent is member of American Legion () Yes () No, VFW () Yes () No, Veteran () Yes () No, Other Organization () Yes () No

Parent is a member of civic organization. Is so, list. _____

List all brothers and sisters dependent on parents, or guardian:

Name	Age	School or Occupation
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Is Home Rented () Yes () No - Owned () Yes () No - Is Home Mortgaged () Yes () No If Mortgaged, show Monthly Payment _____

Name your College selections:

(1st Choice) _____ (2nd Choice) _____ (3rd Choice) _____

Major in College:

(1st Choice) _____ (2nd Choice) _____ (3rd Choice) _____

Are there any family members attending college? () Yes () No If yes, how many? _____

Are you a member of a Church Youth Organization? () Yes () No If Yes, what church? _____

Which Elementary School did you attend? _____

Past or current Semester average grade scores in: Math _____ Science _____ History _____ P.E. _____ Conduct _____ Class Attendance _____

Have you ever held a part time job? () Yes () No - If yes list dates and places:
