

NEWBURYPORT HIGH SCHOOL

Class Rank _____
(verifiable with Student Support Office)

EXTERNAL SCHOLARSHIP APPLICATION - 2017

IMPORTANT: Use this universal application form to apply for external scholarships as specified in the Local Scholarship booklet. Write the name of the scholarship in the field provided. Carefully follow submission instructions as outlined by each individual sponsor. Submit this completed form, along with any other application materials requested by the sponsor, no later than the due date specified by each sponsor. (NOTE: Do not change format of this form.)

Please TYPE or PRINT

NAME OF SCHOLARSHIP _____

Name _____
Last First Middle Initial

Home Address _____
Street City State Zip

Email Address _____ Phone _____

Date of Birth _____ Years attended Newburyport High School _____

Name(s) of Parent/Guardian and Occupation (1) _____ / _____
 (2) _____ / _____

How many children are in your family? _____ age(s) _____, _____, _____, _____, _____, _____

If one or both of your parents are deceased, please check, or if you were raised in a single parent home, please check.

Which school do you plan to attend? List name & address in the space provided. **Are you taking a "gap" year?** yes no

1st Choice: _____ Acceptance (circle one) yes no waiting to hear

2 or 4-year school? ____ Total costs per year _____ Tuition _____ Room & Board _____

2nd Choice: _____ Acceptance (circle one) yes no waiting to hear

2 or 4-year school? ____ Total costs per year _____ Tuition _____ Room & Board _____

3rd Choice: _____ Acceptance (circle one) yes no waiting to hear

2 or 4-year school? ____ Total costs per year _____ Tuition _____ Room & Board _____

Planned major? _____ For what occupation? _____

What is the estimated total of any other expenses (books, travel)? _____

List the name and amount of any scholarships or grants that you have been awarded for the coming school year.

Name of Award	Amount	Granted by	Pending

List your work experience during the past four years. Indicate dates employed and appx. hours worked each week.

Position	Date From (month/year)	Date to (month/year)	Hours per week	Amount earned wkly

Do you plan to work this summer? (explain) _____

BELOW EXPLAIN YOUR PARTICULAR NEED FOR SCHOLARSHIP HELP. (TYPED ONLY)

LIST ALL SCHOOL, SPORTS, LEADERSHIP AND COMMUNITY SERVICE ACTIVITIES (TYPED OR ATTACH RESUME)

LIST ACADEMIC ACHEIVEMENTS AND/OR AWARDS (TYPED OR ATTACH RESUME)