

Alworth Memorial Fund Application

SAMPLE, FORM

PERSONAL INFORMATION

Student: SAMPLE, FORM

Mailing Address:

City/State/Zip: Duluth, MN

E-mail Address:

Date of Birth: US Citizen

Curent Age: 0

xyz

Gender:

Phone (Cell):

Phone (Home):

Facebook

Twitter

Instagram

Parent/Guardian:

Mailing Address:

City/State/Zip:

Occupation:

Phone:

Deceased

County: St Louis

High School:

Grad Date:

Parent/Guardian:

Mailing Address:

City/State/Zip:

Occupation:

Phone:

Deceased

Ages

of Siblings 1 - 10:

of Siblings 10 - 18:

of Siblings 18 - 30+:

Attending Higher Ed: 0

COLLEGE/UNIVERSITY

First Choice:

City/State:

Intended Major Field of Study

First Choice:

Years Needed:

Second Choice:

City/State:

Second Choice:

Years Needed:

GPA and Test Scores

Cumulative GPA:

Class Rank:

Number in Class: 0

ACT Test Scores

Composite: 0 Reading: 0

English: 0 Science: 0

Math: 0 ACT Date:

Plan to Retake ACT: Yes No

ACT Retake When:

ACT Verified Date:

COLLEGE CREDIT

City/State:

Cumulative GPA:

0.00

0.00

0.00

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HIGH SCHOOL CREDITS

	<u>Regular</u>	<u>Honors</u>	<u>CIS/CITS</u>	<u>AP</u>	<u>PSEO</u>	<u>IB</u>
Regular English:	1.00	0.00	0.00	0.00	0.00	0.00
Literature:	0.00	0.00	0.00	0.00	0.00	0.00
Composition	0.00	0.00	0.00	0.00	0.00	0.00
	0.00	0.00	0.00	0.00	0.00	0.00
	0.00	0.00	0.00	0.00	0.00	0.00
Americah Hist:	0.00	0.00	0.00	0.00	0.00	0.00
World History:	0.00	0.00	0.00	0.00	0.00	0.00
American Govt:	0.00	0.00	0.00	0.00	0.00	0.00
Economics:	0.00	0.00	0.00	0.00	0.00	0.00
Civics:	0.00	0.00	0.00	0.00	0.00	0.00
	0.00	0.00	0.00	0.00	0.00	0.00
	0.00	0.00	0.00	0.00	0.00	0.00
French:	0.00	0.00	0.00	0.00	0.00	0.00
German:	0.00	0.00	0.00	0.00	0.00	0.00
Spanish:	0.00	0.00	0.00	0.00	0.00	0.00
Chinese:	0.00	0.00	0.00	0.00	0.00	0.00
	0.00	0.00	0.00	0.00	0.00	0.00
	0.00	0.00	0.00	0.00	0.00	0.00
Algebra I:	0.00	0.00	0.00	0.00	0.00	0.00
Algebra II:	0.00	0.00	0.00	0.00	0.00	0.00
Algebra III:	0.00	0.00	0.00	0.00	0.00	0.00
Geometry:	0.00	0.00	0.00	0.00	0.00	0.00
Trigonometry:	0.00	0.00	0.00	0.00	0.00	0.00
Calculus:	0.00	0.00	0.00	0.00	0.00	0.00
Calculus II:	0.00	0.00	0.00	0.00	0.00	0.00
Statistics:	0.00	0.00	0.00	0.00	0.00	0.00
	0.00	0.00	0.00	0.00	0.00	0.00
	0.00	0.00	0.00	0.00	0.00	0.00
Computer Science:	0.00	0.00	0.00	0.00	0.00	0.00
Biology:	0.00	0.00	0.00	0.00	0.00	0.00
Physics:	0.00	0.00	0.00	0.00	0.00	0.00
Chemistry:	0.00	0.00	0.00	0.00	0.00	0.00
Anatomy/Physiology:	0.00	0.00	0.00	0.00	0.00	0.00
Zoology:	0.00	0.00	0.00	0.00	0.00	0.00
	0.00	0.00	0.00	0.00	0.00	0.00
	0.00	0.00	0.00	0.00	0.00	0.00

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FINANCIAL

EXPENSES

Tuition and Fees: \$0.00
Room and Board: \$0.00
Transportation: \$0.00
Books and Supplies: \$0.00
Incidentals: \$0.00
Total Expenses: \$0.00

RESOURCES

Savings/Investments: \$0.00
Parents or Estate: \$0.00
Part-time work: \$0.00
Tuition Grants/Incentives: \$0.00
Other Scholarships: \$0.00
Total Resources: \$0.00

Needed to
balance budget:
\$0.00

Employment History

Employer:

Dates:

Type of Work:

Hours per Week:

Employer:

Dates:

Type of Work:

Hours per Week:

IRS Income Tax

Do you live with Step Parent? No

INCOME

A G I

Taxable

Do you live with Single Parent? No

Parents:

\$0.00

\$0.00

If your parents do not file with the IRS, please explain:

IRS Form 1040 will be submitted by:

- E-mail 4506-T Received
 Mail
 Fax

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ACTIVITIES

	9	10	11	12	Leadership Role	Letter
Nat'l Honor Society:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
Math Team:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
Robotics Team:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
Knowledge Bowl:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
Debate/Speech Team:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
Peer Helper/Tutor:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>

School Newspaper :	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
Yearbook:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
Key:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
Diversity Club:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
Mock Trial:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
Green Club:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>

Student Council:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
Class Officer:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
LINK Crew:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
Junior Rotarian:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>

Band / Ensemble:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
Choir / Ensemble:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
Drama / Musical:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>

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ACTIVITIES

VARSITY SPORTS	9	10	11	12	Leadership Role	Letter
Fall	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
Winter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
Spring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>

COMMUNITY	9	10	11	12	Leadership Role
Theatre / Music:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Boy / Girl Scouts:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4 H:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Church Youth Group:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

AWARDS / HONORS

Awarding Organization	Honor	Date (month/year)
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What adversity have you experienced? What did you do? What did you learn?

How will you pay for your college education?

Describe your passion for your chosen field?

What else would you like to share?

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Letters of Recommendation I personally asked teachers for Letter of Recommendation

Full Name

Subject Taught/Title

E-Mail Address

How did you learn about the Alworth Memorial Fund Scholars

Counselor

Flyer

Alworth Representative

Teacher

Friend

Newspaper / Printed Media

Website

Parent / Family Member

Facebook

Poster

Other

Signature and Submission

I have informed my High School Counselors office

If awarded I grant permission to use my name

Information submitted constitutes my Application

If awarded I must decline any local 4 year renewable scholarships

Checked box constitutes my Signature

If Awarded I must submit 4506-T.