

Souhegan Valley Dollars for SCHOLARS[®]



SCHOLARSHIP AMERICA

SOUHEGAN VALLEY CHAPTER PO BOX 713 MILFORD, NH 03055 <http://milfordnh.com/dollars>

HIGH SCHOOL SENIORS 2010 Scholarship Application

To help us with our overhead, please submit two copies of p.1, p. 2 and p. 3.
Please do not staple the pages together.
Please make a copy of entire application and retain for your records.

Scholarships are offered to high school seniors who reside in Milford, NH (equivalency certificates are acceptable). These scholarships are offered to students seeking full-time post-secondary education in a vocational school, junior college, college, or university. Please be aware that you can re-apply each year that you are in college fulltime, pursuing either an Associate or Bachelor's degree, even if you did not receive an award the previous year.

Awards are based on merit and need. Each section of the application receives a score. The applicant's combined score then determines who may be eligible to receive a scholarship. **Merit** is the relative degree of motivation displayed by the applicant in such matters as overall academic performance, involvement with and contributions to school and community organizations, and earning and saving money for his/her education. **Need** is the relative inability of the student to meet the cost of his/her post-secondary education.

All applications are reviewed by a Scholarship Committee. It is in your own best interest to make this information as complete and accurate as possible. **All information on the application is handled in the strictest confidence.** Each applicant is assigned a number so no member of the review committee knows the identity of the applicants. Make full use of the questions that describe any unusual circumstances that could affect your relative need. **Good luck to all applicants.**

INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED

If you have any questions concerning the application process, you may contact: **Linda Gott at 673-0557**

Mail application to: **Linda Gott, VP DFS**
42 Brookview Court
Milford, NH 03055

DEADLINE FOR POSTMARKON FINANCIAL FORMS & APPLICATION IS:
April 8, 2010

NO EXCEPTIONS TO THIS DEADLINE.

***IMPORTANT:** *If your final college selection changes your answers to Questions 10, 11, 12, & 13, then you must notify **Linda Gott at 673-0557 immediately.** Failure to do so could mean loss of eligibility to receive a scholarship.*

Email address _____

Social Security#: _____

1. Name: _____ Date of Birth: _____
Last First Middle Initial

2. Home Address: _____ Home Telephone: _____
Street/P.O. Box Town

3. High School Attended: _____ High School Graduation Date: _____

4. School of Applicant's Choice: _____
Name Address

5. Student is Accepted: _____ Pending: _____ Will be enrolled full time _____ or part time _____

6. What is your intended field of study? _____

7. Number of years to complete your course of study? _____

8. Expected graduation date from this program: _____ Degree: _____

9. Will live on campus: _____ Will live off campus: _____ Will commute: _____

*10. Total Cost of **Tuition** only:.....\$ _____

*11. Total Cost of **Room** and **Board** only (if applicable) \$ _____

*12. Other anticipated expenses: (books, lab fees, supplies, transportation, etc.).....\$ _____

| | |
|---------------------------------|--|
| *13. Commuting Students: | |
| A. | Total cost of yearly meal plan at your college (supply this number even if you elect not to use it).....\$ _____ |
| B. | Total number of weeks you will be using your vehicle commuting to and from college in a year.....\$ _____ |
| C. | Total number of miles commuted per week.\$ _____ |

14. Father's Name: _____ Mother's Name: _____

15. Father's Occupation and Employer: _____ Father's email: _____

16. Mother's Occupation and Employer: _____ Mother's email: _____

17. Age of Siblings: _____

***IMPORTANT:** If your final college selection changes your answers to Questions 10, 11, 12, & 13, then you must notify **Linda Gott at 673-0557 immediately**. Failure to do so could mean loss of eligibility to receive a scholarship.

PLEASE SUBMIT 2 COPIES OF THIS PAGE.

NOTE: If more space is required to explain any items below, continue comments on reverse side. Do not attach extra pages to this application.

18. Have you worked while in high school? During vacation? List **ALL** employment since entering high school, detailing period worked, hours per week, and earnings. **Show all full time and part time employment separately** (even if with the same employer).

| Employer & Position | Month/Yr. Date From | Month/Yr. Date To | Hrs./Week | Total Gross Amount Earned |
|---------------------|------------------------|----------------------|-----------|------------------------------|
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19. What were your earnings from **Jan. 1, 2009 to Dec. 31, 2009 (this year only)**?.....\$ _____

20. How much of your **2009 earnings** (Question #19) did you save toward college expenses?.....\$ _____

21. Explain how you used the balance of your **2009 earnings**.....\$ _____

22. Explain any extraordinary family circumstances that affect your parents' (guardians') ability to contribute to your education. Be specific and give dates:

NOTE: If more space is required to explain any items above, continue comments on reverse side. Do not attach extra pages to this application.

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23. For the past four years, list your **High School activities**, offices held, music, sports, clubs etc., and **community service activities** (scouts, church etc.) in which you have participated without compensation. List any honors or awards received, include Varsity letters.

| Activity | No. Years Participated | Special Awards/Honors |
|----------|------------------------|-----------------------|
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24. List **only** the "Dollars for Scholars" Fund Raising activities in which you and/or another family member have participated:
 Place a checkmark next to the activity and write date(s) and brief details (role) of participation:

- *DFS Officer _____
- *Attendance at most meetings _____
- *Election Day Bake Sale _____
- *Pumpkin Festival _____
- *MHS Play Bake Sale _____
- **Phone-a-thon Worker _____
- *Carnival (posters or clean-up) _____
- *Car Wash Worker _____
- *Town Deliberative Session _____
- *Blanket Sales _____
- *Other Activities _____

25. **In 100 words or less, outline/list/bullet your educational and career aspirations, and goals for the future. Be very specific. Omit past accomplishments.** You may wish to consider the following questions when formulating your answer:
 What degree do you plan to get? What do you plan to do after college? What personal goals do you have (long & short term)?

NOTE: If more space is required to explain any items above, continue comments on reverse side. Do not attach extra pages to this application.

PLEASE SUBMIT 2 COPIES OF THIS PAGE.

***IMPORTANT: If your final college selection changes your answers to Questions 10, 11, 12, & 13, then you must notify Linda Gott at 673-0557 immediately. Failure to do so could mean loss of eligibility to receive a scholarship.**

In submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge.
I understand that this application cannot be processed if it is not complete.

Signature of Applicant: _____

Date: _____

Social Security #: _____

Mail the application, FAQ and other financial forms to:

**Linda Gott, VP DFS
42 Brookview Court
Milford, NH 03055**

This application will require extra postage. If you wait until the last day to mail this application, be sure to have it postmarked in your presence by a postal clerk.

DEADLINE FOR POSTMARK ON FINANCIAL FORMS & APPLICATION IS:

April 8, 2010

NO EXCEPTIONS TO THIS DEADLINE.

REMINDERS

We need two copies of page 1, page 2 and page 3.

Please do not staple the pages together.

We only need one copy of the financial section, pages 5 and 6.

Please do not staple the pages together.

We recommend that you keep a copy of the entire application for your records.

We are sorry but we are unable to accept electronic copies of your application.

Please do not staple the pages together.

-----**-Cut Here**-----

PARENT/GUARDIAN SIGNATURE: _____ Date: _____

Student name: _____

Please have your parent or guardian sign this slip, separate it from this application, then submit it directly to your Guidance Department to complete and release school paperwork directly to: **Linda Gott, VP DFS
Souhegan Valley Chapter "Dollars for Scholars", PO Box 713, Milford, NH 03055**

I hereby grant Souhegan Valley Chapter "Dollars for Scholars", Scholarship America permission to obtain information, reference letters*, grade transcripts, and standardized test scores from the student's High School Guidance Office to support this application.

**Please submit two reference letters to obtain maximum credit. Extra references cannot be considered.
Please inform Guidance which 2 letters of reference you want used for this application.**

INSTRUCTIONS FOR COMPLETING THE FINANCIAL ASSISTANCE QUESTIONNAIRE (FAQ)

- A. **APPLICANT INFORMATION:** The scholarship applicant's name should appear on the first line on the FAQ; however, the questionnaire must be completed by the parents of the applicant. An exception is if the applicant is legally classified as an independent student. The independent student must supply his/her financial information.
- B. **PARENTS' INCOME, EXPENSE AND ASSET DATA:** Information on this form must be from the parents' completed tax return or based on estimated information to be filed by April 15, 2010. Be sure to check the appropriate box.
1. **Adjusted Gross Income** can be found on IRS FORM 1040 and is gross income reduced by specific adjustments allowed by law.
 2. **Total Federal Tax Paid** includes the total amount of federal income tax to be paid as reported on IRS FORM 1040. This is not the amount withheld from employee paychecks. (The amount withheld should be adjusted by any refund or additional taxes due.) Do not report state income tax.
 3. **Total Income** earned should be reported individually for both parents. If the student resides with only one parent, CSFA prefers to receive financial information from both natural parents, when possible. Financial information must be received from the parent who claims the child as a dependent for tax purposes. If a parent has remarried, the spouse's information is required if the spouse is a legal guardian of the student, or claims the student as a dependent, or the student is included in the spouse's benefit plan. If necessary, two Financial Data sections may be submitted by the student. A copy of the Financial Data section may be made in order for one to be completed by each parent.
 4. **Untaxed Income and Benefits** include any other income or benefits not included in the adjusted gross income figure. Do not include untaxed contributions to retirement plans.
 5. **Medical and Dental Expenses** include only those expenses not paid by insurance. Do not include premium payments.
 6. **Total cash, checking, savings, cash value of stocks, etc.** include liquid assets that can be used for educational expenses. Not included are IRA, 401K, or other retirement plan funds.
 7. **Total number of family members** living in the household and primarily supported by the above income includes dependent college students living away from home.
- C. **ADDITIONAL INFORMATION:** Be sure to check the appropriate box giving the current marital status of the persons for whom financial information is being submitted.
- Include the total number of **all** family members attending post-secondary school at least half time. (Post-secondary school includes any two- or four-year college or vocational school.) **Be sure to include the applicant in this number.**
- D. **CERTIFICATION AND SIGNATURES:** This form **must be signed by both the student and the parent** completing the FAQ. Parents' signature is not required for an independent student. Please read the certification.
- E. **GUARDING YOUR PRIVACY:** We take our responsibility of guarding your privacy very seriously. Only two people (our treasurer and one of our vice presidents) will see the page that includes identifying information. These sheets are shredded after the awards are made. **The financial pages (5 & 6) are reviewed for need by only one person, our treasurer, and are shredded after the awards are made.**

NOTE: Any exceptions to providing financial information as instructed above must be submitted to DFS in writing.

FINANCIAL ASSISTANCE QUESTIONNAIRE (FAQ)© for 2010-2011 school year



Souhegan Valley Chapter, Dollars for Scholars

***See FAQ page for instructions in completing this form**

A. STUDENT

- Mr.
 Ms.

| | | | |
|----------------------------|------------|----------------|------------------------|
| | | | |
| Last Name | First Name | Middle Initial | Social Security Number |
| Permanent Mailing Address: | | | |
| | # | Street | Apartment # |
| | | | () |
| City | State | Zip | Daytime Phone Number |

B. PARENTS' INCOME, EXPENSE, AND ASSET DATA (FOR THE YEAR JANUARY 1, 2009 TO DECEMBER 31, 2009)

The applicant's parent(s) must complete the following section. **NOTE:** If legally classified as an independent student, use this section to supply your (and your spouse's, if any) financial information. Indicate whether the information is from:

- Estimates based on current income information to be filed by April 15, 2010.
 A completed tax return - IRS FORM 1040 filing date of April 15, 2010.

State of Residence (state where parents or independent student reside and pay state income tax) _____

1. Adjusted gross income (FORM 1040) \$ _____
2. Total federal tax paid (FORM 1040) \$ _____
3. Total income of father or self if independent student \$ _____
- Total income of mother \$ _____
4. Yearly untaxed income and benefits: Social Security, AFDC, child support, other \$ _____
5. Medical/Dental expenses not paid by insurance (exclude premiums) \$ _____
6. Total cash, checking, savings, cash value of stocks, etc. (exclude retirement plan funds, IRA, 401(k)) \$ _____
7. Total number of family members living in the household and primarily supported by the reported income # _____

C. ADDITIONAL INFORMATION

Parents' or independent student's current marital status is: single married separated divorced widowed

Total number of family members who will be attending a post-secondary school at least ½ time during the 2010-2011 school year, including applicant # _____

D. CERTIFICATION AND SIGNATURES

CERTIFICATION: All of the information on this form is true and complete to the best of my (our) knowledge. If asked by an authorized official of CSFA, I (we) agree to give proof of the information that I (we) have given on this form. I (we) realize that this proof may include a copy of my (our) 2009 U.S. and/or state income tax return. I (we) also realize that if I (we) do not give proof when asked, the student may not get aid.

Applicant's Signature

Parent's Signature Father Mother
 (Not required for independent student)

Do you have legal custody of the student? Yes No

Is the student your dependent? Yes No _____
 Date Completed



SCHOLARSHIP AMERICA

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Income Verification Parent's Tax Forms and Income Information

For non-tax filers and all tax filers (includes the 2009 IRS Form 1040, 1040A, 1040EZ, TeleFile Tax Record, a tax return from Puerto Rico, or a foreign income tax return).

If you did not keep a copy of the 2009 tax return, request an RTFTP printout or Letter 1722 from the Internal Revenue Service or a copy from your tax preparer.

Check here and attach signed 2009 U.S. Federal Income Tax Return and **W-2 forms**.
Mail copies of forms 1040, 1040A, 1040EZ, & W-2 only. Do not send schedules.

Check here if you will not file and are not required to file a 2009 U.S. Federal Income Tax Return.
If you and/or your spouse did not file and are not required to file a 2009 Federal Income Tax Return, list below your employer(s) and any income received in 2009.

| Sources (Use the W-2 form or other earnings statements.) | Amount |
|--|--------|
|--|--------|

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Sign this Worksheet

By signing this worksheet, I (we) certify that all the information reported is complete and correct.

Student

Social Security#:

Father (step-father)

Date:

Mother (step-mother)

Date:

All financial information must be enclosed with your application. The entire application must be postmarked by **April 8, 2010** *Please be aware that additional postage will be necessary.*