



Scholarship Fund Program

Grant Application/Financial Assistance Questionnaire

Applicant Information

Name: _____
Last First Middle Initial

Permanent Mailing Address: _____

Day Time Phone: _____

E-mail Address: _____

Social Security Number: _____

Washington Financial Acct. No.: _____

Education Information

Name/Address of high school, college, university or other school you currently attend:

(Note: If you are currently working full-time, indicate here.)

Current Grade Point Average: _____ *(Please attach current transcripts.)*

Course of Study: _____

Year in School: _____

Name/Address of college, university or school which you will be attending:

(Please include a copy of your college acceptance letter.)

Estimated Costs

Please list the estimated costs for the upcoming school year:

Tuition: \$ _____

Room/Board: \$ _____

Total estimated cost: \$ _____

Please list all scholarships/grants awarded and provide a brief description of each:

_____ \$ _____

_____ \$ _____

_____ \$ _____

Total scholarships/grants: \$ _____

Estimated Costs To Be Funded

Total estimated cost from above: \$ _____

Less: Total scholarships/grants awarded: — \$ _____

Total cost to be funded: \$ _____

Parent/Legal Guardian Information

Occupation: Father _____ Mother _____ Guardian _____

Parent's current marital status: Single Married Separated Divorced Widowed

Number of family members attending a post-secondary school at least 1/2 time during the upcoming school year, including applicant: _____ Family Size: _____

Parent/Guardian total annual income (from FAFSA): \$ _____

Certification and Signatures

Applicant's Signature

Date

Parent/Guardian's Signature

Date

Parent/Guardian's Signature

Date

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 the Community Scholarship Foundation of Washington Financial Bank, I (we) agree to provide proof of the information that I (we) have given on this form. I (we) realize that if I (we) cannot provide proof to support the information on this application, I (we) may forfeit any opportunity for financial aid.

