



Evansville Vanderburgh School Corporation Application for Scholarships

**Return completed application to school counselor by deadline.
All information is confidential and read by the Scholarship Committee only.**

High School:

1. Student Name - Last: _____ First: _____ Middle: _____

2. Student Birth Date: _____

3. Student Social Security Number: _____

4. Student Permanent Street Address: _____

City: _____ State: _____ Zip Code: _____

5. Student's Email Address (not EVSC email): _____

6. Student Phone Number: _____

7. Parent/Guardian #1 Name: _____

8. Parent/Guardian #1 Street Address: _____

City: _____ State: _____ Zip Code: _____

9. Parent/Guardian #1 Email Address: _____

10. Parent/Guardian #1 Phone Number: _____

11. Parent/Guardian #1 Occupation/Title/Position: _____

Company: _____

12. Parent/Guardian #2 Name:

13. Parent/Guardian #2 Street Address:

City:

State:

Zip Code:

14. Parent/Guardian #2 Email Address:

15. Parent/Guardian #2 Phone Number:

16. Parent/Guardian #2 Occupation/Title/Position:

Company:

17. Parent Marital Status: Single Married Separated Divorced

18. Please explain, briefly, any special family circumstances the committee should be aware of (parent deceased, parents divorced, family illness, special housing circumstances, loss of employment, etc.):

19. Name of college you plan to attend:

Street Address:

City:

State:

Zip Code:

20. Major course of study and/or career goal:

21. List community/church activities. List any honors/awards received in community/church.
 Attach supplementary sheet if necessary.

Community / Church Activities	Community / Church Honors or Awards	# of Years

22. List school extracurricular activities, offices held, honors/awards received.
 Attach supplementary sheet if necessary.

Activity	Offices Held	Honors/Awards	# of Years

23. List your employment experiences, part or full-time, of at least eight (8) weeks duration. Begin with the most recent employment.

Place of Employment	Type of Employment	Dates of Employment

24. Write a brief statement about your educational / career goals. Give your reasons for desiring a scholarship, and any unusual circumstances that may be of help to the committee.

Due to the delayed release of the 2024-2025 FAFSA (*Free Application for Federal Student Aid*), students can complete the [Federal Student Aid Estimator](#) if they have not received their SAI (Student Aid Index) report by the application deadline. Please submit either the Student Aid Index report or the Student Aid Estimator in order to receive points on the rubric.

The information on this form is true to the best of my knowledge:

Parent / Guardian Signature

Student Signature

Date: _____

Date: _____

Attachments:

- Please attach a small photo to this application.
- Please attach a copy of the letter of acceptance to college/university.
- Please attach a copy of the *Free Application for Federal Student Aid (FAFSA)* report or the *Student Aid Estimator (SAI)*.
- Return completed application to your school counselor and request that a transcript of your academic record be attached to this application.