

**THE BEULAH SIEGEL SCHOLARSHIP  
APPLICATION FORM  
Due April 15, 2019**

One or more scholarships will be awarded to a Wayne County resident who will be a graduate of the Wooster High School Class of 2019. This scholarship will be awarded to an applicant or applicants who, **because of financial need**, might otherwise not be able to obtain full time education or vocational training beyond high school.

This scholarship is renewable for up to four (4) years, upon satisfactory completion of all academic requirements and good conduct, all of which are at the discretion of the selection committee.

If more space is needed to answer any of the following questions, please continue to answer on plain paper and attach to this application.

*Please print or type*

**GENERAL INFORMATION**

1. Name of student \_\_\_\_\_
2. Address \_\_\_\_\_
3. City, State, Zip Code \_\_\_\_\_
4. Phone number \_\_\_\_\_ Email address \_\_\_\_\_
5. Names of both parents/guardians (if addresses are different, please furnish)  
Mother: \_\_\_\_\_  
Father: \_\_\_\_\_
6. Are you living fulltime with both parents? If "Non", please explain. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
7. If you are **not** living full time with both parents, are you receiving financial support from both? \_\_\_\_\_. Please provide details including the name of the parent or guardian you are living with, the type and amount of current parental/guardian support and whether financial support will be provided if you attend college. \_\_\_\_\_  
\_\_\_\_\_

**THE BEULAH SIEGEL SCHOLARSHIP  
APPLICATION FORM  
Page 2**

8. If you are **not** living full time with both parents, is either parent or are both parents required by any court order to provide or to contribute to your education beyond the age of 18? Please include all relevant details. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**II. FINANCIAL INFORMATION**

1. Father's employer and position \_\_\_\_\_

\_\_\_\_\_

2. Mother's employer and position \_\_\_\_\_

\_\_\_\_\_

3. Gross annual **family** income \_\_\_\_\_

Please attach copy of 2018 Form 1040 of both parents, if joint return, or for each parent if they filed separate returns.

4. Please obtain and provide the "expected family contribution" as shown on the FAFSA \_\_\_\_\_

\_\_\_\_\_

5. Estimated total market value of **parents' net assets** (include all assets less all debts including investments, bank accounts, money market accounts, real estate, retirement assets)

\_\_\_\_\_

6. Estimated total market value of **student's assets** (include all accounts, trusts, savings accounts, government bonds, checking account, inheritances, and all other assets) \_\_\_\_\_

\_\_\_\_\_

7. Number and ages of other dependent children \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**THE BEULAH SIEGEL SCHOLARSHIP  
APPLICATION FORM  
Page 3**

8. Number of other family members including yourself and your parents who will be attending college in 2019/2020 \_\_\_\_\_

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9. Have you applied for other aid or scholarships? \_\_\_\_\_ If yes, please describe in detail the aid and amount applied for. \_\_\_\_\_

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10. Have you already been granted any scholarships and/or grants and/or other financial aid? If yes, please describe in detail. \_\_\_\_\_

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11. Are you willing to provide other supporting documents of financial information if asked to do so? (tax return, home mortgage info, other debt info, etc.) \_\_\_\_\_

**III. PLEASE ALSO ATTACH THE FOLLOWING:**

1. An autobiography of not more than two pages which would include your community, school and personal activities, work experience, any achievements, special talents, awards, personal goals or any other personal facts you deem relevant.
2. A one page statement setting forth the special circumstances including need which you feel might qualify you for this particular scholarship.
3. One letter of academic reference and one letter of personal reference from a non-relative.
4. A current transcript of your grades which includes class rank and ACT or SAT scores.
5. A copy of the Student Aid Report (SAR) provided to you by the US Department of Education. After the SAR has been submitted, please follow up with all subsequent aid information as you receive it, reporting such additional information to the guidance office.

**THE BEULAH SIEGEL SCHOLARSHIP  
APPLICATION FORM  
Page 4**

**IV. SIGNATURES**

We each certify that all the information in this application and attached to it is accurate.

_____ Signature of student	_____ Date
_____ Signature of parent/guardian	_____ Date
_____ Signature of parent/guardian	_____ Date

If you are living entirely with one parent, the signature of that custodial parent will be sufficient.

**This application and attachments should be mailed to:  
Wayne County Community Foundation  
Attn: Scholarships  
518 N Market Street  
Wooster, OH 44691**

**Submission must be postmarked no later than April 15, 2019.**

**Note:** If you are a recipient of this scholarship, through the Wayne County Community Foundation, all monetary awards will be made payable to your account at the post-secondary school you will be or are attending. No checks will be awarded directly to any individuals.