EDWARD, ARLENE AND KAYE MAIBACH CAREER CENTER
SCHOLARSHIP APPLICATION FORM
Due March 16th

This scholarship is available to a Wayne County Schools Career Center senior who is enrolling in college on a full-time basis (at least 12 semester hours). Applicant must have maintained a minimum 3.00 high school GPA and must have financial need.

Please print or type
Name of Student _______________________________________
Address ________________________________________________________________________________
City/State/Zip Code_____________________________________________________________________
Telephone ___________________________ Email Address____________________________________

High School __________________________________________________________________________
College ______________________________________________________________________________
Planned Major____________________________
Will you be attending college full-time? ____________________________________________________
Parent(s) Name(s)______________________________________________________________________

FINANCIAL INFORMATION:
1. Father’s employer and position__________________________________________________________
2. Mother’s employer and position________________________________________________________
3. Student’s employer and position_______________________________________Hours per Week____
4. Adjusted gross annual family income: IRS Form 1040 (line 37) _____________; IRS Form 1040A
   (line 21) _____________; IRS Form 1040EZ (line 4) _____________
5. Number and ages of other dependent children __________________________________________
6. Number of other family members currently attending college_______________________________
7. Estimated market value of parents’ assets (including cash, investments, savings/checking accounts,
   money market accounts, real estate) _______________________________________________________
8. Estimated market value of student’s assets_______________________________________________
9. Are there any special circumstances, other than family income, that should be considered in
   evaluating your application (family debts, loss of income, illness, etc.)? If so, please explain
   ___________________________________________________________________________________

10. Have you been notified, or do you anticipate notification, of any scholarships or financial aid awards
    for the coming academic year? Please list and include the amount.____________________________
    ___________________________________________________________________________________
ALSO INCLUDE:

- An essay not to exceed 300 words stating why you feel you should be considered for the scholarship.
- A current high school transcript.

SIGNATURES:
We hereby certify that all information in this application is accurate.

______________________________  ______________________________
Signature of Student             Signature of Parent/Guardian

Return completed application packet to your counselor by March 16th.

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. Unless otherwise stated, checks will be issued in July, prior to the new school year. No checks will be awarded directly to any individuals.