



NAME _____ NEC Account Number # _____
 SOCIAL SECURITY NUMBER _____
 MAILING ADDRESS _____
 TELEPHONE NUMBER _____ NUMBER IN FAMILY _____

PLEASE LIST YOUR COLLEGE CHOICES, ACCEPTED OR NOT, YOUR EXPECTED ANNUAL EXPENSES (TUITION, ROOM, BOOKS, ETC). LOOK UP THIS INFORMATION IN THE COLLEGE CATALOG IN THE COUNSELOR'S OFFICE.

1. _____ ACCEPTED YES/NO _____ COST _____
2. _____ ACCEPTED YES/NO _____ COST _____
3. _____ ACCEPTED YES/NO _____ COST _____

FATHER'S NAME _____ OCCUPATION _____
 MOTHER'S NAME _____ OCCUPATION _____

FINANCIAL NEED

DOES YOUR FAMILY HAVE ANY EXTRAORDINARY EXPENSES, OR FINANCIAL LIMITATIONS? (YES/NO) PLEASE EXPLAIN IF YOUR ANSWER IS YES. PLEASE GIVE AS MUCH INFORMATION AS POSSIBLE. YOU MAY USE THE BACK OF THIS DOCUMENT TO FULLY EXPLAIN YOUR CIRCUMSTANCES.

ANNUAL FAMILY INCOME

Under \$40,000 _____, \$40,000 to \$60,000 _____, \$60,000 to \$80,000 _____,
 \$80,000 to \$100,000 _____, Over \$100,000 _____

PLEASE LIST ANY OTHER SCHOLARSHIPS OR GRANTS FOR WHICH YOU APPLIED:

1. _____ AMOUNT _____ RECEIVED (Y/N)
2. _____ AMOUNT _____ RECEIVED (Y/N)
3. _____ AMOUNT _____ RECEIVED (Y/N)

WHAT FINANCIAL CONTRIBUTION WILL YOUR PARENT'S MAKE? _____
 WHAT FINANCIAL CONTRIBUTION WILL YOU MAKE? _____
 DO YOU INTEND TO WORK DURING THE SCHOOL YEAR? _____

_____ PLEASE CHECK HERE IF YOU DO NOT WANT US TO USE YOUR NAME FOR FUTURE PROMOTIONS OF THE SCHOLARSHIP FUND.

SCHOOL INFORMATION:

GPA _____ CLASS RANK _____ OUT OF _____ ACT COMPOSITE _____
 DIPLOMA GOAL: STANDARD _____ VOCATIONAL _____
 COLLEGE PREP _____ HONORS _____

**PLEASE ATTACH A TRANSCRIPT TO YOUR APPLICATION
AND TWO WRITTEN RECOMMENDATIONS**

PLEASE LIST SCHOOL ACTIVITIES AND OFFICES HELD:

PLEASE LIST HONORS AND AWARDS YOU HAVE RECEIVED IN HIGH SCHOOL:

PLEASE LIST ANY COLLEGE COURSES YOU HAVE TAKEN WHILE IN HIGH SCHOOL:

EXTRA-CURRICULAR ACTIVITIES

PLEASE LIST COMMUNITY AND CHURCH ACTIVITIES YOU HAVE PARTICIPATED IN FOR THE LAST FOUR YEARS:

PLEASE LIST JOBS YOU HAVE HELD (PAID OR UNPAID) AND YEARS INVOLVED:

I CERTIFY THE ABOVE INFORMATION IS CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND IF AN AWARD IS MADE, AND/OR MY SITUATION CHANGES, MY AWARD COULD BE ALTERED. I FURTHER UNDERSTAND THAT CONSENT IS GIVEN TO RELEASE ACADEMIC, FINANCIAL OR OTHER NECESSARY INFORMATION AS MAY BE REQUIRED BY THE SCHOLARSHIP DONOR.

STUDENT SIGNATURE _____ DATE _____
PARENT/GUARDIAN SIGNATURE _____ DATE _____

PLEASE ALSO ATTACH YOUR PICTURE. Note: A “Liability Release for Use of Photograph and/or Name must also be completed and submitted.