

LAURA SCUDDER GRANT APPLICATION

Last Name _____ First Name _____ M.I. _____

Address _____ Apt/Unit _____

City _____ Zip Code _____

Phone # _____ Email _____

Date of Birth _____ Place of Birth _____

High School _____ Graduation Date _____

Marital Status _____ # of Dependents (and age if minor) _____

College Presently Attending _____ Major _____

Expected Graduation Date _____ Current G.P.A. _____

Have applied to a 4 year college? Yes / No Have you been accepted? Yes / No /Unknown

Name of Colleges _____

Employer (if applicable) _____

Position _____ Hours per week _____ Annual Income _____

Other sources of income _____ Amount _____

In 400 words or less, please write your reasons for applying for the Laura Scudder Grant.

I declare that I am a U.S. Citizen and the information provided is true, correct and complete to the best of my knowledge. If I receive the \$3000.00 Grant, I agree to provide my tax I.D. number.

Applicant's Signature

Date

