

WASHINGTON STATE SCHOLARSHIP FOUNDATION

2017 SCHOLARSHIP APPLICATION FORM

The *Washington State Scholarship Foundation* will award a limited number of scholarships. All applicants must have a public education with high school completion signified by a high school diploma or G.E.D. Regardless of age, all applicants must be first time entering freshman.

For the 2017/2018 academic year, scholarships of \$5,000 will be given to recipients entering four year post-secondary institutions. \$2,500 scholarships will be awarded for community colleges, voc-tech schools or other accredited institutions. The Scholarship Foundation will give primary consideration to the financial need of each applicant.

If your household income is greater than listed below, you do not qualify.

Number in Household	1	2	3	4	5	6	7	8+
Household Income	\$40,250	\$48,000	\$51,750	\$57,500	\$62,100	\$66,700	\$71,300	\$75,900

APPLICANT'S NAME _____

STREET ADDRESS _____

CITY/STATE _____ ZIP _____ BIRTHDATE _____

PHONE _____ E-MAIL _____

PARENT(S)/GUARDIAN(S)/SPOUSE NAME(S) _____

Place of employment:

Applicant _____ Full-time Part-time

Parent/Guardian _____ Full-time Part-time

Parent/Guardian _____ Full-time Part-time

Spouse (if applicable) _____ Full-time Part-time

FAMILY MEMBERS:

Name	Relationship	Age	Grade	School
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Applicant's High School & Graduation Date: _____

School Address _____

High School Contact (Name & Phone) _____

Diploma or GED Year received: _____

School you plan to attend:

University/College/Post-Secondary Institution Choice: 4 yr. 2 yr. Other _____

School Name: _____

CHECKLIST

Include the below attachments with this application

All attachments listed must accompany your application or it will be disqualified.

Applicant's Official High School Transcript (and G.E.D. Certificate, if applicable)

Attach one of the following three documents:

1. IRS Form 1040 for tax year 2016 from the person claiming the applicant as a dependent
2. Applicant's FAFSA Form (Free Application for Federal Student Aid)
3. SAR (Student Aid Report)

Two (2) Letters of Recommendation that describe your best traits from people other than your family members.

Name _____ **Phone #** _____

Name _____ **Phone #** _____

Please answer and attach your responses to both of the following two questions.

Attach on separate paper, 1 typewritten page each, 10 pt. font

1. Who are you? (Include family/personal information, community service, positions of leadership, involvement in school and community, work experience, and youth group activities.)
2. How will this scholarship be a bridge to your future?

Applicant's signature* _____ **Date** _____

* By signing this application, I give the *Washington State Scholarship Foundation* permission to use and/or publish my name if I receive a scholarship award.

Mailing Instructions

Mail completed application:

Application must be mailed and postmarked by March 3, 2017.

Address to: Washington State Scholarship Foundation
Scholarship Application
PO Box 53306
Bellevue, WA 98015

- All recipients will be notified by May 27, 2017.
- **You will not be notified unless you are awarded a scholarship.**
- Please read the application form carefully. All incomplete applications will be disqualified.
- If you need additional help contact your teacher, advisor, or counselor.

For more information or questions please visit our web site or contact us at:

Web: <http://www.washingtonscholarships.org/>

Email: info@washingtonscholarships.org