

THE GREENWOODS SCHOLARSHIP FOUNDATION
APPLICATION FORM

(Please type or print in ink)

Date _____

Full Name _____ Single _____ Married _____

E-Mail Address (please don't use your high school email address) _____

Mailing Address _____

Town of Legal Residence _____ Home Telephone _____

Date of Birth _____

If the income information you reported on your 2019 FAFSA does not take into account any special circumstances that would warrant further explanation, please attach a signed separate page along with any appropriate documentation. Please be assured that all information will be kept in the strictest of confidence and will be eventually shredded.

If applicant is dependent on parents, please fill in this section

Father's Name _____ Living _____ Deceased _____

Address _____ Home Telephone _____

Occupation _____

Where Employed _____

Mother's Name _____ Living _____ Deceased _____

Address _____ Home Telephone _____

Occupation _____

Where Employed _____

If applicant is married, please fill in this section

Name of spouse _____

Where is applicant employed _____

Number of children and ages _____

Is spouse attending college?

Where _____

Full-time (≥ 12 credits) _____ or Part-time (≤ 11 credits) _____

Name of Elementary School _____

Name of High School _____ Year of Graduation _____

Are you an Emergency Medical Technician? Yes _____ No _____

Where are you currently or planning to attend college?

Major _____

Full-time (≥ 12 credits) _____ or Part-time (≤ 11 credits) _____

Undergraduate college or Technical School grade level during 2019-20 school year _____

If not attending college in the past year, how have you been occupied? _____

What are your career plans? _____

List extra-curricular activities: include awards received, offices held, as well as, participation in athletics, clubs, and organizations.

In school _____

In the community _____

What employment have you had? _____

OPTIONAL INFORMATION: If there is any information not requested by the Foundation which would expand upon your need for financial assistance or your specific accomplishments, please feel free to include this information below as a personal statement. Letters of recommendation MAY be submitted by those who know you or your family very well. This is NOT a requirement.

By February 15, 2019, mail this application to:

GREENWOODS SCHOLARSHIP FOUNDATION
P.O. BOX 834
WINSTED, Connecticut 06098

If you receive a scholarship, you will be notified by mail in June.