



**ACT – NOW Scholarship Application**  
**Advisory Community Team – Neighbors On Watch (*Gerrish Township*)**

Applicant's Name \_\_\_\_\_

Permanent Address \_\_\_\_\_ Phone \_\_\_\_\_

City, State, Zip \_\_\_\_\_

High School Attending \_\_\_\_\_

GPA \_\_\_\_\_ National Honor Society \_\_\_\_\_ Class Rank \_\_\_\_\_

I Plan to Attend \_\_\_\_\_

Date of Acceptance \_\_\_\_\_ College Major \_\_\_\_\_

One-Year Program \_\_\_\_\_ Two-Year Program \_\_\_\_\_ Four-Year Program \_\_\_\_\_

Name of Parents or Guardian \_\_\_\_\_

Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Father's or Guardian's Occupation \_\_\_\_\_

Mother's or Guardian's Occupation \_\_\_\_\_

Number of Children in Family \_\_\_\_ How many family members presently attending college \_\_\_\_

Please list all scholarships or financial aid applied for: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list all scholarship awards or financial aids awarded and known to you at this time:

Name of Award \_\_\_\_\_ Amount of Award \_\_\_\_\_

Name of Award \_\_\_\_\_ Amount of Award \_\_\_\_\_

Name of Award \_\_\_\_\_ Amount of Award \_\_\_\_\_

Other Financial Aids \_\_\_\_\_

Source and amount of funds available for year in which Scholarship is requested:

Parents \$ \_\_\_\_\_ Student Savings \$ \_\_\_\_\_

Scholarships \$ \_\_\_\_\_ Other (relatives, etc.) \$ \_\_\_\_\_

Indicate Total Household Gross Income (*Check one*):

<input type="checkbox"/> \$5,000 - \$20,000	<input type="checkbox"/> \$50,000 - \$65,000	<input type="checkbox"/> \$100,000 - \$120,000
<input type="checkbox"/> \$20,000 - \$35,000	<input type="checkbox"/> \$65,000 - \$80,000	<input type="checkbox"/> \$120,000 - \$150,000
<input type="checkbox"/> \$35,000 - \$50,000	<input type="checkbox"/> \$80,000 - \$100,000	<input type="checkbox"/> \$150,000 and above

Indicate any special circumstances you feel the Scholarship Committee needs to take into consideration:

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List extra-curricular activities you have been involved in: \_\_\_\_\_

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List any community service you have been involved in or service organizations that you belong to:

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List any work experience you have had (part-time, summer job, etc.): \_\_\_\_\_

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Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_