

**MARBLE FALLS HIGH SCHOOL
LOCAL SCHOLARSHIP APPLICATION**

Name _____ SS # _____ Phone _____
Address _____
Are you a U.S. citizen? _____ Date of Birth _____ Age _____

Father/Guardian _____ Check if Deceased
Address _____
Name & Address of Employer _____
_____ Title/Position _____
Phone (home) _____ Phone (work) _____

Mother/Guardian _____ Check if Deceased
Address _____
Name & Address of Employer _____
_____ Title/Position _____
Phone (home) _____ Phone (work) _____
What is your **Religious Affiliation**? _____ (optional)

Do you qualify for **free/reduced lunch program**? Yes No
Number of people in your household. _____
Have you **applied for federal financial aid**? Yes No Not yet When? _____
If yes, **do you qualify** for any federal aid? Yes No Do Not Know
Number of family members in college next year (include yourself) _____
Have you received any scholarships? Yes No If yes, please list source name and amount:

Are there any **extenuating circumstances** you want to share? List- _____
Name any **physical handicap** you have or a family member has: _____

College/University/Vocational Technical School you wish to attend:
1st Choice: _____
Name _____ City _____ State _____
Applied: Yes No Accepted: Yes No If yes, please attach a copy of your letter of acceptance.
2nd Choice: _____
Name _____ City _____ State _____
Applied: Yes No Accepted: Yes No If yes, please attach a copy of your letter of acceptance.
Intended **Major:** _____ Intended **Career:** _____
Do you have any educational plans beyond four years of college? Yes No
If yes, please explain: _____

