**North High School / South High School / Sheboygan Public Education Foundation (SPEF)**

**Do Not Write in this Space**

Class Rank\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**LOCAL SCHOLARSHIP APPLICATION** GPA unweighted \_\_\_\_\_\_\_\_\_

GPA weighted \_\_\_\_\_\_\_\_\_

ACT Comp\_\_\_\_\_\_\_\_\_

Writing\_\_\_\_\_\_\_\_

SAT Reading\_\_\_\_\_\_\_

Math\_\_\_\_\_\_\_\_\_

Writing \_\_\_\_\_\_\_

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Last) (First) (Initial)

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip \_\_\_\_\_\_\_\_\_\_\_ Student ID# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Home Telephone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student Cell Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Counselor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\*\*COLLEGE YOU PLAN TO ATTEND \_\_\_\_\_\_ Accepted: Yes No**

**\*\*OTHER COLLEGES YOU ARE CONSIDERING**

**\*\*Intended major**

Local Elementary School Attended & Number of Years Attended \_\_\_\_\_\_\_ \_\_\_\_\_\_

Local Middle School Attended & Number of Years Attended

Father\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Employer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***YEARS OF EDUCATION*** **\_\_\_\_\_ High School Attended/Graduated** *(Example: Years Attended/High School Graduate)(9-12 years)*

**\_\_\_\_\_ Post Secondary Attended/Graduated (***Example: Years Attended/Graduated) (1,2,3,4,5,6,7,8+ years)*

Mother\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Employer\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***YEARS OF EDUCATION*** **\_\_\_\_\_ High School Attended/Graduated** *(Example:Years Attended/High School Graduated) (9-12 years)*

**\_\_\_\_\_ Post Secondary Attended/Graduated (***Example: Years Attended/Graduated) (1,2,3,4,5,6,7,8+ years)*

Parents: \_\_\_\_\_ Divorced \_\_\_\_\_ Separated \_\_\_\_\_\_ Deceased You live with \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Brothers and/or Sisters living at home**

Name Age School / Occupation Name Age School / Occupation

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**Parents’ Financial Statement from Previous Tax Year Federal Tax Form**

Parents’ Financial Statement from 2014 Federal Tax Return (2014 is used to gather information as many may not have completed their 2014 taxes prior to the due date of this application. This way we are comparing the same information for all.) If you filed a Joint Tax Return use the Adjusted Gross Income (AGI) you submitted to the IRS, even if it included step-parents. In the “changes in parents’ income level” section, please include a statement regarding any unusual expenses due to medical, disability, and/or employment, etc.

Custodial Parents’ AGI: $ Non-Taxable Income: $ \_\_\_\_\_From: Social Security ☐ Student Savings ☐ Child Support ☐

Non-Custodial Parents’ AGI: $ Total number of family members living at home

Number of dependents in your parents’ family/home (excluding you) Number attending college \_

Please specify any changes in parents’ income level due to medical disability, employment or other:

**Student Activity Profile**

**Extra-Curricular Activities Grade Participated and # of Years Leadership Positions**

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

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**Awards / Year Presented Awards / Year Presented (cont.)**

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**Community Activities # Years Participated # Hours Committed Leadership Positions**

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**Work Experience/Position Dates of Employment**

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**Disclaimer and Signature**

**In order to respect the rights of all students, it shall be the policy of the Sheboygan Area School District to insure that no student will be excluded from, denied the benefits of, or be subjected to discrimination under the school’s educational program or activities, or on the basis of ancestry, creed, physical, mental, emotional, or learning disability, marital or parental status, national origin, pregnancy, race, sex, or sexual orientation.**

**Recipient of a scholarship must be enrolled and attending an institution of higher education by October 15 following graduation. The award is conditioned upon applicants satisfying certain criteria, to include in some instances restrictions upon the location of the college or university, which the applicant will attend. The selection committee must be advised of any change concerning the college or university at which an applicant intends to enroll. Notice must be provided in writing to the counseling center as soon as possible. Authorization is granted to North and South High School and SPEF to release any information on this application to the selection committees. Signatures must be in black or blue ink on this page.**

**Authorization is granted to Sheboygan North and Sheboygan South High School and SPEF to release any information on this application to North and South High School and SPEF and outside scholarship committees. I attest that the information on this local scholarship application is accurate to the best of my knowledge.**

**Signature of Parent Date**

**Signature of Student Date**

**DEADLINE: NO LATER THAN 4:00 P.M. ON FRIDAY, MARCH 4, 2016**

**LATE/INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED**

**RETURN THIS FORM TO:**

**North High Local Scholarships TO North High School**

**South High Local Scholarships TO South High School**

**SPEF Administered Scholarships TO**

**SPEF OFFICE -- (605 North 8th Street, Suite 214, Sheboygan, WI 53081)**