



LINKS SCHOLARSHIP APPLICATION DATA

Name:		
Street Address:	City:	Zip Code:
Home Phone:	Cell Phone:	
Email Address:	Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male	
Parent Names:	First Generation College Student: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Parent Occupations:		
Are you: <input type="checkbox"/> US Citizen <input type="checkbox"/> US National <input type="checkbox"/> US Permanent Resident		

Sibling Name	Age	Grade Level	Address if different from above

POST SECONDARY DATA

NAME OF SCHOOL YOU PLAN TO ATTEND	APPLIED		ACCEPTED		
	Yes	No	Waiting Decision	Yes	No
1 st CHOICE:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 nd CHOICE:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 rd CHOICE:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

FIELD OF STUDY YOU PLAN TO PURSUE:

TRANSCRIPT DATA

APPLICANT RANK:	IN A CLASS OF:
CUMULATIVE WEIGHTED GPA:	CUMULATIVE UNWEIGHTED GPA:
ACT COMPOSITE:	SAT VERBAL: SAT MATH:
WAITING FOR SCORES: <input type="checkbox"/>	TAKING SAT AGAIN: <input type="checkbox"/> YES <input type="checkbox"/> NO
COUNSELOR VERIFICATION:	

FINANCIAL NEED STATEMENT

ESTIMATED COST PER YEAR OF COLLEGE	TUITION	ROOM/BOARD

DO YOU HAVE:

- FLORIDA PRE-PAID- TUITION ONLY?
- FLORIDA PRE-PAID- TUITION, ROOM, AND BOARD?

AMOUNT FAMILY CAN CONTRIBUTE PER YEAR: _____.

PERSONAL SAVINGS YOU HAVE PUT ASIDE FORE EDUCATION: _____.

FAMILY’S ANNUAL GROSS INCOME PER THE PRIOR YEAR (IRS 1040 TAX FORM)

(Subject to verification, the 1040 will be requested for some scholarships)

- UNDER \$20,000
- \$40,000-\$50,000
- \$70,000-\$90,000
- \$125,000-\$140,000
- \$20,000-\$30,000
- \$50,000-\$60,000
- \$90,000-\$110,000
- \$140,000-\$160,000
- \$30,000-\$40,000
- \$60,000-\$70,000
- \$110,000-\$125,000
- \$160,000-AND OVER

STUDENT WORK EXPERIENCE:

EMPLOYER	DATES	SCHOOL YR. HRS/WEEK	SUMMER HRS/WEEK	RESPONSIBILITIES

UNIQUE CIRCUMSTANCES

Are there any special *financial or personal* circumstances that need to be considered?

SCHOOL INVOLVEMENT

List all *school activities, clubs, and sports* that you were involved in. Estimate the hours per year and school years you spent within each activity, club, or sport. Please indicate special awards, honors or offices held.

COMMUNITY INVOLVEMENT

List all *community activities/ volunteer work for non-profit organizations* you have done, such as, activities through church, non-school organizations, scouting, theatre, environmental groups, etc. Include total number hours and length of time for each organization. Please indicate special awards, honors, or offices held.

What do you feel is your most positive contribution to your high school or to one of your community activities? Explain.

ESSAY (What are your personal goals?)

Not to exceed 250 words. Please use space provided below.

CERTIFICATION AND SIGNATURE

Check List

- Completed, signed application form (including essay of personal goals)
- Two Letters of Recommendation
- Any special attachments (resume, transcript, IRS Information, if requested)

**All of the information included on this form, including attachments is true, correct and complete.
Verification may be obtained from any source.**

STUDENT SIGNATURE

DATE

GUIDANCE COUNSELOR SIGNATURE

DATE