

LOCAL SCHOLARSHIP APPLICATION

You will complete one application and turn in a copy for EVERY scholarship you wish to apply for. If you are applying for 5 different scholarships, you must make 5 copies of this application. Each application will have a different scholarship box checked. **Return all applications to the Counseling Center secretaries by Wednesday, February 17th at 12:30 pm. No late applications will be accepted. Contact Mr. Pawlak in the Counseling Office with any questions.**

If a scholarship requires additional pieces of information (rec. letters, other essays, etc.) be sure to staple those additional pieces to the correct scholarship application. Staples should be in the top left corner with all additional pieces placed behind the scholarship application. Attached pieces must be limited to one page unless otherwise specified. **Missing information or failure to follow these requirements will result in disqualification of the application.**

If the scholarship requires a **Cover Page**, you MUST include it. The cover page must be placed in front of the scholarship application. If a cover page is required, please simply state: 1.) Full name and 2.) The name of the scholarship for which you are applying. If your application requires a cover page, **DO NOT PLACE YOUR FIRST OR LAST NAME ANYWHERE ON THE SCHOLARSHIP APPLICATION...**when it asks about siblings, please list “sibling 1, sibling 2, etc...” rather than providing identifying information. However, you MUST provide your signature at the bottom of the scholarship application.

Carefully read the requirements page and check the scholarship for which you are applying:

*To check a box, right-click the empty square and choose the checkmark

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|--|---|--|
| ☐ Jackie M. McNicholas Scholarship | ☐ DuPage Women’s Club | ☐ Red Grange Award |
| ☐ John Sluis Scholarship | ☐ Clifford Johnson Scholarship (COVER) | ☐ Wheaton Garden Club |
| ☐ Susan Sauer Memorial Scholarship (COVER) | ☐ Jefferson Early Childhood Center | ☐ Wheaton Warrenville PTA Council |
| ☐ Jayne Baldwin Memorial | ☐ Wheaton Warrenville Education Scholarship (COVER) | ☐ Edison |
| ☐ Tiger PAWS Scholarship | ☐ Siciak EL Scholarship | ☐ Hubble |
| ☐ Warrenville Historical Society | ☐ Wheaton HS Alumni Scholarship | ☐ Monroe |
| ☐ Wheaton Jr. Women’s Club | | ☐ Franklin |
| ☐ Rotary Club of Wheaton AM | | |

Name		Birthdate:
Home Address:		
City:	State:	Zip
Home Telephone:	Student Cell Number:	
Personal Email (Not School Email)::		

Occupation	Parent 1:	Parent 2:
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Siblings	
Sibling #1	AT HOME (Y/N)
School/College/Occupation:	
Sibling #2	AT HOME (Y/N)
School/College/Occupation:	
Sibling #3	AT HOME (Y/N)
School/College/Occupation:	
Sibling #4	AT HOME (Y/N)
School/College/Occupation:	

APPROXIMATE HOUSEHOLD YEARLY GROSS INCOME

***To check a box, right click the empty square and choose the check mark**

- | | | |
|--|---|--|
| ☐ Under \$30,000 | ☐ \$60,001 - \$70,000 | ☐ \$100,001 - \$150,000 |
| ☐ \$30,001 - \$40,000 | ☐ \$70,001 - \$80,000 | ☐ \$150,000 - \$200,000 |
| ☐ \$40,001 - \$50,000 | ☐ \$80,001 - \$90,000 | ☐ Over \$200,000 |
| ☐ \$50,001 - \$60,000 | ☐ \$90,001 - \$100,000 | |

DISTRICT 200 SCHOOLS ATTENDED		
Elementary:	Middle School:	High School:
Weighted GPA on 4.0	SAT:	ACT:

☐ **IF you attended Jefferson Early Childhood, please indicate in the “check box.”**

EXTRA-CURRICULAR SCHOOL ACTIVITIES - HIGH SCHOOL ONLY (Include number of years plus offices held, committees chaired, awards earned, etc.)			
Activity	Years	Leadership/Responsibilities	Hrs/Week

COMMUNITY PROJECTS, CHURCH ACTIVITIES, VOLUNTEER RESPONSIBILITIES while in h.s.
(Explain responsibility and include number of hours per week or month and number of years)

Activity	Years	Leadership/Responsibilities	Hrs/Week

JOBS HELD:

Job Title	Employer	Employment Dates	Hrs/Week

SCHOOL ATTENDING AFTER GRADUATION		
1st Choice:		MAJOR:
2nd Choice:		MAJOR:
YEARLY COSTS:	Tuition:	Room/Board:

PERSONAL STATEMENT: In the space provided below, explain your future educational and career goals, especially as related to your present accomplishments. Do NOT attach a separate paper with an essay, use the space provided to type your answer. Do NOT use any font smaller than 10 pt.

STATEMENT: (400 word maximum)

SPECIAL NEED STATEMENT:

In the space provided below, tell about any special situation(s) that affects your capacity to obtain an education. This can include, but is not limited to, financial constraints and family circumstances. **Complete ONLY if there is a special need.**

STATEMENT: (250 word maximum)

Please sign to verify all the information you included is accurate and everything that you have written is your own without the use of AI.

APPLICANT SIGNATURE:	DATE:
PARENT/GUARDIAN SIGNATURE:	DATE:

*****If you are required to provide a cover page, you still NEED to provide a signature*****