Rev. 2/21/2024



AVANELLE HUTCHINGS POWELL SCHOLARSHIP

TO BE COMPLETED BY STUDENT AND PARENTS (Cannot be in the top 10% of your class)

Date:				
DEADLINE: March 13, 2024				
Please return your completed application and documents to Mrs. Stanton at the High School				
PERSONAL DATA				
Student's Name	Phone#			
Home Address				
Name of Parents or Guardian				
Home Address				
Are both parents employed? Yes No				
Father's Occupation				
Place of Employment_				
Mother's Occupation_				
Place of Employment				
Number of children in family N	umber younger			
Number in college next school year including this student				
FUTURE PLANS:				
I am interested in attending college beginning with the spring/fall semester. (Circle one)				
College choice				
Course of study (Major and minor)				

What vocational or professional field do you plan to enter?					
How many years of school will you attend?					
What degree or certification will you earn upon completion?	?				
FINANCIAL INFORMATION:					
How much will it cost you to complete a year of schooling i following according to where you plan to live.	ncluding room and board at the college of your choice? Complete the				
- If you live on campus (dorm) -	- Yearly Tuition -				
- If you live in an apartment -	- Books and Fees -				
- If you live at home -	- TOTAL -				
Have you applied for other scholarships? Plea	ase list any you have received or expect to receive and the amount.				
How much money did you earn this summer?					
How much did you save for college?					
How much money will you receive from family funds or oth	ner sources toward your college education?				
(MET, Social Security, separated parent contribution	ns, et cetera)				
	e will be available for the beginning of school this fall?				
Please explain:					
Parents and/or students: Please explain any circumstances is	n the home or family which might create a special need for financial aid:				

*What is the pre-	tax adjusted gross income, combined ar	nnual income of both parents with	th whom you live?			
Under \$10,000 \$10,000-14,000 \$14,000-17,000 \$17,000-20,000 \$20,000-25,000 \$25,000-30,000	\$30,000-35,000 \$35,000-39,000 \$39,000-42,000 \$42.000-45,000 \$45,000-48,000 \$48,000-51,000 How much U.S. Income Tax was paid last year?		\$66,000-70,000 Over \$70,000			
	Is the source of income from a business Farm?	s?	_			
	Employed by a company?	Self Employed?				
Is the income: Salary? Or hourly paid rate? *This information can be found on your FAFSA						
	one to two-page essay on your plan rofessional goals after the comple			h school and your		
Student's Signa	ture	Date				
Parent's Signature		Date				
*PLEASE NO	ΓE: Student and parent signature ection committees.			material to the		
Counselor's Sig	nature	Date				
Please contact	the counseling office for a copy of	your high school transcript	to include with y	our application.		

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Complaints or inquiries should be forwarded to: