Starr Commonwealth Scholarship Application

Please fill out the application completely and sign on the last page. Please complete the essays as requested on page 4. Please attach a copy of your most recent grades or a transcript, as well as a copy of the financial aid award letter from your educational institution.

I. General Information:

Name:				
Street Address				
City, State, Zip				
Phone				
Email				
DOB:				
Marital Status: # of Dependents:				
Date entered Starr: Date of completion:				
Campus: Albion Van Wert Columbus Detroit Battle Creek				
Are you a first-time applicant? No Yes				
If no, when did you previously apply?				

II. Educational History:

High School Attended:	
Date of diploma:	
Previous Colleges attended:	

III. Educational Program Information:

School Name:			
Address:			
Student ID Number:			
Type of School:			
4-year College/Univ	ersity _	2-year/Co	ommunity College
Technical/Trade Sch	hool _	Other (P	lease specify)
Intended Major/Course of S	Study:		
Expected Completion Date:			
Terms attending this schoo	l year:		
Fall	_Winter/Spring	L	Summer

IV. Financial Status:

Expenses:

Tuition:	\$
Fees:	\$
Books & Supplies:	\$
Room & Board (on-campus only):	\$
Total Expenses:	\$

* We must receive a copy of your school's financial aid award letter*

Funding Sources:

Grants:	\$
Scholarships:	\$
Loans/Other Aid (Please specify)	\$

Currently Employed at:	
Currently Monthly Income:	\$

Scholarship Amount Requested:

\$_____

V. <u>Please complete the following essays and attach:</u>

- A. State your educational goals and how this scholarship will aid you in achieving your goals 200 words or less.
- B. "How Starr Commonwealth has helped me" or "What I have learned from Starr Commonwealth," in at least 200 words.
- C. Please state any special circumstances you would like the committee to consider.

IV. Certification:

I hereby certify the facts set forth in my application are true and complete to the best of my knowledge. I also acknowledge that my presence at the Founder's Day Celebration on the first Sunday of October is requested, and I agree to try to make the necessary arrangements to attend.

Applicant's Signature

Date

V. <u>Please attach the following additional information:</u> A. Most recent transcripts/ grade report B. Copy of Financial Aid Award Letter

Failure to provide all requested documents may result in delay or denial of your application.

Mail all pages and attachments to:

Scholarship Office Starr Commonwealth 13725 Starr Commonwealth Road Albion, MI 49224

Or Fax to:

Scholarship Office – (517)630-2400

Revised 4/2013