

# JC Legg Memorial Scholarship

Return to Counseling Office by May 2, 2022

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Name: \_\_\_\_\_

Graduation Date: \_\_\_\_\_

Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Birth Date: \_\_\_\_\_

Circle One: Male      Female

2

GPA: \_\_\_\_\_ ACT: \_\_\_\_\_

3

College Preferences: \_\_\_\_\_  
\_\_\_\_\_

Have you been accepted? \_\_\_\_\_ If yes, where? \_\_\_\_\_

4

Anticipated College Major: \_\_\_\_\_

5

**Career Goals:**

6

Anticipated College Expenses:

Tuition: \_\_\_\_\_

Room/Board: \_\_\_\_\_ Books: \_\_\_\_\_

Travel: \_\_\_\_\_

Total Amount Estimated: \_\_\_\_\_

7

List other scholarships and/or loans for which you have applied:

8

Total amount you have been approved for as of the date of this application: \_\_\_\_\_

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**Briefly Summarize your work experience/employment history:**

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

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Have you saved any money, yourself, for your college tuition? No: \_\_\_\_\_ Yes: \_\_\_\_\_  
If yes, how much? \_\_\_\_\_

10

What school awards have you received?

11

What school activities (clubs, teams, subjects) do you enjoy?

12

## PERSONAL INFORMATION

Father's Full Name: \_\_\_\_\_ Mother's Full Name: \_\_\_\_\_

Father's Occupation: \_\_\_\_\_ Mother's Occupation: \_\_\_\_\_

Please check the amount that reflects your family's Adjusted Gross Income for 2021:

Under \$15,000: \_\_\_\_\_ \$15,000-\$20,000: \_\_\_\_\_ \$20,000-\$30,000: \_\_\_\_\_

\$30,000-\$40,000: \_\_\_\_\_ \$40,000-\$50,000: \_\_\_\_\_ Over \$50,000: \_\_\_\_\_

Parents marital status: Married: \_\_\_\_\_ Separated \_\_\_\_\_ Divorced \_\_\_\_\_ Deceased \_\_\_\_\_

How many children are in your family? \_\_\_\_\_ How many living at home? \_\_\_\_\_

How many in college? \_\_\_\_\_

\*If you do not live with your parents, please summarize your circumstances:

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You may attach the following in resume form:

1. A summary of school activities.
2. A list of community volunteer activities.
3. A list of honors/AP/dual enrollment classes taken from grades 9-12.

***I have read this application and to my knowledge all information is correct. I realize that failure to provide accurate information will result in this application being cancelled.***

Signature of applicant

Date

Signature of Parent/Guardian

Date