

## **American Association of University Women**

Easton (PA) Branch

## **SCHOLARSHIP APPLICATION**

Please follow instructions below when filling out this application. Failure to do so may make application invalid.

- € Applicant must complete each item thoroughly.
- € Applicant must be from an Easton/Phillipsburg area high school.
- € Applicant must be planning to attend a two-year or four-year, fully accredited college or university.
- € Applicant must establish eligibility through financial need and scholastic merit.
- € Applicant must submit a copy of their high school transcript.
- € Applicant must be in the top 20% of their class.
- € A signed copy of applicant's parents Income Tax Return for the year 2020 or 2021 must accompany application form as well as student's 2020 or 2021 Income Tax Return if applicable.
- **€** Application forms must be received no later than March 31, 2022.

Name			Phone				
Address		,					
71441.033							
Do parent	s rent or own a home?						
State value of home and mortgage balance if applicable							
State monetary value of family assets such as stocks, bonds, investments (trusts, etc.)							

Explain unusual family circumstances (i.e. illness, special care, siblings in college, loss of income, etc.) which would affect family ability to help with college costs:						
List extra-curricular or community activities in which you are significantly involved. Briefly elaborate:						
ciaborate.						
What do you ho	pe to gain from col	llege and why have	you selected the co	lleges listed below?		
	pe to gain from col r educational goals		you selected the co	lleges listed below?		
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Please state you	r educational goals	:				
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Please state you	r educational goals	:				
Please state you  EXPENSES:	r educational goals	:	AMOUNT APPLICANT			
EXPENSES: Tuition & Fees	r educational goals	:	AMOUNT APPLICANT Savings			
EXPENSES: Tuition & Fees Room & Board	r educational goals	:	AMOUNT APPLICANT Savings Loans			

CERTIFICATION OF NEED	
I, the undersigned, hereby state that financial	aid is essential to enable me to attend college.
The questions contained on this application has the best of my knowledge.	eve been answered truthfully and accurately to
Signature of Applicant:	Date:

Send completed form to: aauweastonscholar@gmail.com