

**Asbury and Elizabeth Baldwin Memorial Scholarship Application Form**

**Name:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_

**Parent's Names:** \_\_\_\_\_

**Father's Occupation:** \_\_\_\_\_ **Employer:** \_\_\_\_\_

**Mother's Occupation:** \_\_\_\_\_ **Employer:** \_\_\_\_\_

**Names and ages of brothers/sisters:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**High School:** \_\_\_\_\_ **Date of Graduation:** \_\_\_\_\_

**Scholastic average in high school:** \_\_\_\_\_

**SAT, ACT, and other scores:** \_\_\_\_\_

**List of awards, school activities, offices held, honors, etc.:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**List of community activities:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**List of church activities:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Combined Family Annual Income:**

\_\_\_\_\_ under \$25,000      \_\_\_\_\_ \$25,000 - \$50,000      \_\_\_\_\_ \$50,000 - \$75,000

\_\_\_\_\_ \$75,000 - \$100,000      \_\_\_\_\_ \$100,000 +

**Educational goals:** \_\_\_\_\_

\_\_\_\_\_

**Have you been officially accepted by a college?** \_\_\_\_\_ **If so, where?** \_\_\_\_\_

**What other scholarship aid do you hope to receive?** \_\_\_\_\_

**Please submit a short essay on why you would like to receive the Asbury and Elizabeth Baldwin Memorial Scholarship.**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_