



APPLICATION FOR SCHOLARSHIP

(Deadline: Saturday, April 18, 2009 5:00 o'clock p.m.)

PLEASE PRINT IN BLACK INK OR TYPE

Student's Last Name: _____

First Name: _____ Middle Initial: _____

Address: _____
(Street Address) (City) (State) (Zip)

Student's Social Security Number: _____ (Must Provide Copy of Card)

Student's Birth Date: _____ Ethnicity [Please Circle One]: (White) (Black) (Hispanic) (Other)

Student's Email address(es): _____

Student's Telephone Number(s): _____

Parent's Name: _____

Day Time Phone Number: _____ E-Mail Address: _____

Student's School Name: _____

School Address: _____
(Street Address) (City) (State) (Zip)

School Telephone Number: _____

School Counselor(s) Name: _____ OR _____

Student's Overall GPA: _____ No. of Students in Graduating Class: _____

Student's Class Ranking: _____

**IMPORTANT: PLEASE PROVIDE AN OFFICIAL COPY OF YOUR
CURRENT HIGH SCHOOL TRANSCRIPT WITH THIS APPLICATION.**

Family Income Information: Documentation must be provided to meet income requirements (2007 and 2008 U.S. Tax Returns). This will be used for determination of scholarship qualification purposes and distributed to Magnus Charitable Trust Directors, advisors, and judges .

Single Parent Household Income: _____ (Per Year 2008)

Additional Income: _____ (Per Year 2008)

Dual Parent Household Income: _____ (Per Year 2008)

Additional Income: _____ (Per Year 2008)

Number of Adults in Household: _____ Number of Children in Household: _____

Full Name of Adult(s): _____

Name, Address, and Telephone Number of Accepted and Selected Educational Institution:

Name: _____

Address: _____

Telephone No.: _____ Financial Aid Telephone No.: _____

Assigned Financial Aid Counselor or Contact Name: _____

YOUR SIGNATURE HEREIN BELOW SERVES AS YOUR ACKNOWLEDGMENT THAT YOU HAVE READ AND RECEIVED THE ATTACHED RULES PERTAINING TO THE SCHOLARSHIP APPLICATION PROCESS FOR THE MAGNUS CHARITABLE TRUST, AND THAT ALL OF THE RESPONSES ON THIS FORM ARE CORRECT AND THAT YOU AGREE TO ALL OF THE RULES PERTAINING TO THIS APPLICATION.

(Student's Signature) (Dated)

(Parent's Signature) (Dated)

(Parent's Signature) (Dated)