SCHOLARSHIP APPLICATION

TO BE COMPLETED BY APPLICANT

NAME: DATE:

ADDRESS:

PERMANENT ADDRESS: (If different from above address when not attending school)

Phone:

Email:

School currently enrolled:

Declared major:

Projected date of graduation:

Financial Aid Contact Person: (include phone or email)

Signature of applicant:

Please also include the following: (may be sent as attachments)

* Recommendation letter
* Copy of unofficial transcript which notes the declared major
* Essay

APPLICANTS ARE ENCOURAGED TO DISCUSS THE NEED FOR COMPLETION OF A *FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT WAIVER* (FERPA) WITH THEIR FINANICAL AID OFFICER FOR SCHOLARSHIP PURPOSES.

Email to: Lriley@baltimorecountymd.gov