

MONTROSE COUNTY SCHOOL DISTRICT COMMON SCHOLARSHIP APPLICATION

This application works best on a computer, but can also be completed on an iPad using the app "Adobe Acrobat Reader." Directions: Download and save this application before filling it out. If you have problems completing or submitting this form, please see your high school counselor.

PERSONAL INFORMATION				
Name of Scholarship for which y Name of High School you attend				
Name				
Full Legal Name: (First, Middle,	Last)			
Nickname	Date of Birth		Current Age	
Permanent Mailing Address				
City		State	Zip code	
Phone				
Email				
FAMILY INFORMATION Parent #1 Name Phone Email Occupation Parent #2 Name Phone Email				
Occupation				
Siblings (Please attach additional	al sheet if needed.)			
Name and Age		School	/Occupation	

GPA AND TEST SCORES	
Weighted GPA (Can be found on HS tr	ranscript)
Class Rank Clas	ss Size
ACT- Provide the highest composite score ye	ou earned on any official ACT administration. Provide your highest section
scores; these can be from multiple tests.	
Highest Composite Score	
EnglishMath S	cience Reading
-	nd Math
Intended College List up to three colleges you are consider	ing, ranked in order of your preference.
1.	
2.	
3.	
Possible Majors List up to 3 majors you are considering. 1. 2. 3.	
List 1-3 careers you are considering.	
1.	
2.	
3.	

FINANCIAL INFORMATION

The following questions ask about the cost of your planned education and the resources that you have to pay for it. You **MUST** answer this section to be considered for a **NEED-BASED** scholarship. This section is **optional** for all other scholarships.

Complete Either Option A or B

Option A

- 1. Print the Financial Aid Package from the top 3 colleges you listed on Page 2 of this application and attach them to your application.
- 2. List any outside monies below not included on your Financial Aid Package (Local scholarships, money from family, savings, job, etc.)

Manay Amount

Worldy Source	Worldy Amount
	\$
	\$
	\$

Option B- Complete for your top 3 colleges

Money Source

EFC amount listed on your FAFSA \$

Name of College		
A.) Tuition	\$ \$	\$
B.) Fees	\$ \$	\$
C.) Room and Board	\$ \$	\$
D.) Books	\$ \$	\$
E.) Personal Expenses	\$ \$	\$
Total (Sum of lines A-E above)	\$ \$	\$
Work Study amount listed on your Financial Aid Package	\$ \$	\$
Total amount of scholarships/grants/free monies listed on your Financial Aid Statement	\$ \$	\$
Total amount of outside monies not included on your Financial Aid Statement (local scholarships, money from family, savings, job etc.)	\$ \$	\$
Total (Sum of lines 1-3 above)	\$ \$	\$

Financial Need Statement (Optional):

Explain your financial situation, including any challenges that might keep you from achieving your goal of attending college. (Attach an extra page if necessary)

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By typing my full legal name, I certify that my application is complete and accurate to the best of my knowle	t vnina mv fi	ull legal name	Legrify that my	v application is co	mplete and ac	curate to the be	est of my knowled-
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STOP! Before emailing your application, confirm you have attached ALL required supplements for this scholarship. Refer to the scholarship description for specifics. Incomplete applications will not be considered.