

# *Chas Hall Memorial Scholarship*

## PERSONAL DATA

Name: \_\_\_\_\_

(Last)

(Middle)

(First)

Address: \_\_\_\_\_

(Street)

(City)

(State)

(Zip)

Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Male \_\_\_ Female \_\_\_

Parents'/Guardians' Names: \_\_\_\_\_

Parents'/Guardians' Employer: \_\_\_\_\_

Length of Employment: \_\_\_\_\_

Parents'/Guardians' Address (if different from yours): \_\_\_\_\_

Parents'/Guardians' Marital Status: Single \_\_\_ Married \_\_\_ Divorced \_\_\_ Widowed \_\_\_

## ACADEMIC DATA

Name of High School \_\_\_\_\_ Year of Graduation \_\_\_\_\_

Cumulative Grade Point Average: \_\_\_\_\_

(Please attach transcript)

Name of vocational school, community college or university you will be attending:

\_\_\_\_\_  
( If you are enrolled in college, please attach current transcript)

Why do you want to attend this school? \_\_\_\_\_

What is your intended field of study? \_\_\_\_\_

What do you hope to do with your education? \_\_\_\_\_

## SCHOOL AND COMMUNITY INVOLVEMENT

List any organizations in which you have been a member or jobs in which you have been employed. Organizations may include academic, athletic, civic, religious or social groups. Jobs may also include volunteer work or internships.

<u>Held</u>	<u>Activity</u>	<u>No. of Years</u>	<u>Positions or Offices</u>

List any awards, honors or recognition received:

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Which of the above experiences (participation in a particular activity, leadership position or honor received) has been most important to you?

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**FINANCIAL DATA**

**(Please attach a copy of your ACT Financial Aid Need Estimator Report - if available)**

Total Number of Family Members in Household (including yourself): \_\_\_\_\_

Number of Family Members in College during 2007-2008 (including yourself): \_\_\_\_\_

Anticipated College Expenses:

Estimated Family Contribution:

Tuition & Fees \$ \_\_\_\_\_

Parents' Contribution:  
(from income and assets) \$ \_\_\_\_\_

Room & Board \$ \_\_\_\_\_

Student Contribution  
(from job and/or savings) \$ \_\_\_\_\_

Books & Supplies \$ \_\_\_\_\_

Other (please list)  
\_\_\_\_\_ \$ \_\_\_\_\_

Other (e.g. relatives; please specify)  
\_\_\_\_\_ \$ \_\_\_\_\_

Total College Expenses: \$ \_\_\_\_\_

Total Family Contribution \$ \_\_\_\_\_

Have you applied for other forms of financial aid at this time?    \_\_\_ yes    \_\_\_ no

Have you received other forms of financial aid at this time?    \_\_\_ yes    \_\_\_ no

If yes, please indicate the type, amount and source:

		Source(s):
Scholarships	\$ _____	_____
Grants	\$ _____	_____
Loans	\$ _____	_____
Workstudy	\$ _____	_____
Other	\$ _____	_____

(Please forward a copy of any current or future financial aid received from any source)

Do you plan to work during the school year? \_\_\_\_\_

If there are special financial circumstances which will affect your education, please describe:

\_\_\_\_\_  
\_\_\_\_\_

**I hereby confirm that all information provided on this application is correct and I understand that any false information automatically disqualifies me from eligibility.**

\_\_\_\_\_  
(Signature of Applicant)

\_\_\_\_\_  
(Signature of Parent/Guardian)

\_\_\_\_\_  
(Date)

**Return by April 1 to:**

Greater Kansas City Community Foundation  
Attn: Scholarships  
1055 Broadway, Suite 130  
Kansas City, MO 64105