

West Scholarship Committee

c/o U.S. Bank PO Box 3168, Portland, OR 97208 541.883.3857 www.merlewestscholarship.com

Scholarship Application

Completed application must be **uploaded** at www.merlewestscholarship.com according to on-line instructions, or **mailed** to the above address and postmarked no later than April 1. Should April 1 fall on a weekend or holiday, application must be uploaded or mailed no later than the first business day following. INCOMPLETE APPLICATIONS WILL NOT BE GIVEN CONSIDERATION.

IMPORTANT: To ensure your information is successfully recieved, please use only Adobe Reader to complete the application form below.

I hereby make application for a scholarship grant of \$			_ to be applied against my educational expenses during my	
	year at		in	State
Fr. So. Jr. Sr.		Name of Institution		State
I expect to graduate in 2	0 with a degree	in		My intended vocation
or profession is			I am a high school gra	duate (or will graduate) from
	High School	in Klamath County	in 20	
I have have not appl	lied for Oregon Promise.			
	PER	SONAL INFORMA	TION	
Name			Date of Birth	//
Last	First	Middle	U.S. Citizen or Hole	d Permanent Resident Card?
Home Address			Yes No	
City	State	Zip	Marital Status	
Telephone Number ()			Dependents	
Email Address			Num	ber Ages
	EM	PLOYMENT HISTO	DRY	
Present/Past Employer				
Address	E	Susiness Phone	Type of Work	Dates (Mo. Yr.)
Present/Past Employer				
Address	F	Business Phone	Type of Work	Dates (Mo. Yr.)
Present/Past Employer		 		
Address		Business Phone	Type of Work	Dates (Mo. Yr.)

ACADEMIC INFORMATION

List all schools attended (High Schools	chool, College, Trade Schools)			
School	Loca	tion	Dates Attended	
Attach transcript(s) for last h	-	e transcript(s) if applicable. If	applying online, follow instructions	
	s From an ACT or SAT Test (Rec structions on the website to uple	•	ool or community college)	
For College: Credit Hours Comp			SAT Scores	
List any School Sponsored Activi	tes in which you have participat	ed or recieved awards (includi	ing athletics):	
Name of Organization	Your Role in It	Frequ	Frequency and Duration	
			·····	
(Attach a sheet if necessary. If ap	plying on-line, create an additio	nal separate PDF page if nece	ssary and follow instructions for upload	
List any non-school sponsored, E		•		
Name of Organization	Your Role in It	Frequ	uency and Duration	
		······		
(Attach a sheet if necessary, If app	olving on-line, create an additio	nal separate PDF page if nece	ssary and follow instructions for upload)	
IMPORTANT:			,	
	d to pursue, and (b) your charac	ter, including moral principle	ed to you, attesting to (a) your aptitude s and citizenship.	
Letter Author's Name	_ 			
Association to Applicant		Association to Applicant		

FINANCIAL INFORMATION

Complete your estimated budget for the upcoming school year, to the best of your ability:

☐ The RECEIPT and EXPENSE columns MUST BALANCE. ☐ Include ONLY budget items which pertain to your DIRECT college expenses. Estimated Budget From ___ __ To ___ Month Year Month Year **RECEIPTS EXPENSES** Available savings Tuition Anticipated summer job income Estimated fees Anticipated income during school year Books From parents, guardians, relatives Room/Board Scholarship grants received Other education expenses (specify) (attach list or, if applying on-line, an additional PDF page) Spouse's income, if applicable LOANS: Actual Proposed Other income (trusts, insurance, etc.) (attach list or, if applying on-line, an additional PDF page) Scholarship gift requested TOTAL \$__ TOTAL \$ If Employed During The School Year: Not Employed ____Full Time ____ Part Time ____ Approximate Hours per Week: _____ Hours Please explain any irregularities in this budget or prepare a supplemental budget and attach to this application. If applying on-line, create a separate PDF page if necessary and follow instructions for upload. PARENT OR SPOUSE OR INDEPENDENT STUDENT FINANCIAL STATEMENT If you do not live with both of your biological parents, please supply financial information for both parents. Name: Address: Address: Employer and Occupation: Employer and Occupation: Relationship: Relationship: Adjusted Gross Income as reported on federal income tax return Adjusted Gross Income as reported on federal income tax return (verified against your Student Aid Report): \$_____ (verified against your Student Aid Report): \$_____ Total Assets (rounded) Total Assets (rounded) Total Liabilities Total Liabilities Indicate the amount your parent can contribute to your Indicate the amount your parent can contribute to your education this academic year: education this academic year: LIST SIBLINGS AND ADDITIONAL PERSONS RECEIVING FINANCIAL SUPPORT FROM FAMILY Name: Relationship: ___ _____ Age: ____ Living at Home? ____ Attending College? _ Name: _____ Relationship: _____ Age: ___ Living at Home? ____ Attending College? ___ _____ Relationship: _____ Age: ____ Living at Home? ____ Attending College? ____ Explain below any other family or extraordinary circumstances that will give a clearer picture of your family's financial situation: NOTE TO PARENT OR SPOUSE: Information given in this application will remain confidential with the U.S. Bank Charitable Services Group and the West Scholarship Signed: Parent or Spouse or Independent Student Committee. However, both reserve the right to require further documentation, including income tax returns, of the above statements if required.

CERTIFICATION

You must obtain your high school transcript and additional transcripts for college attendance, including your most recently completed term prior to April 1st. Please attach the transcript(s) to your application or upload if applying on-line.

You must include a copy of **ALL** pages of your most recent STUDENT AID REPORT (SAR). If you have received your award letter, please send or upload a copy of it as well. The award letter is the letter from the school you will attend listing your financial aid package. If you have not received this letter by April 1st, please mail it immediately upon receipt (whether applying by mail or on-line).

the required d	and mailing this application packet, have you filled in answers to ocuments? Please see Application Instructions PDF for further define, further descriptions of required items are on the website).	
C	Dening Paragraph, Personal and Employment Information Academic and Activities Information Ewo Letters of Recommendation*** Granscript of grades for last high school and each college*** Results from ACT or SAT test*** required unless vocational school or community college) Grannical Information Parent or Spouse or Independent Student Financial Statement Persons Receiving Financial Support Other Than Applicant One-page Composition*** Copy of all Pages of SAR (Student Aid Report)*** Award Letter*** Ewo Signatures **If applying on-line, follow instructions on the website to upload t	(page 1 of application) (page 2 of application) (page 2 of application) (page 2 of application, and above) (page 2 of application) (page 3 of application) (page 3 of application) (page 3 of application) (page 2 of application) (page 2 of application instructions) (page 2 of application instructions, and above) (page 2 of application instructions, and above) (page 2 of application instructions, and below) hese documents.
By mail: Mail you West Scholarship On-line: Follow in	ed all twelve squares above, please sign and date your application or completed application PDF and documents to: Committee, c/o U.S. Bank, P.O. Box 3168, Portland, OR 97208 astructions on the website to upload your completed Application PD	PF and documents
If applying on-line	ch any further records, citations, honors, or other documents you fe , create an additional separate PDF page if necessary and follow inst documents or copies thereof become the property of the committee	cructions for upload).
•	onal information you feel may enhance your probability for scholars essary. If applying on-line, create an additional separate PDF page if	-
It is mandato	ory that you sign the authorization for release of information below	before this application can be processed.
incurred read the q I hereby a	ertify that I will use the proceeds of this scholarship award, if g in securing an education at an accredited educational institution uestions asked in this scholarship application and certify that a uthorize the U.S. Bank Charitable Services Group and the Westranscript of my grades at any future time.	on. I further certify that I have carefully my answers are true and correct.
	Date	Scholarship Applicant
Note : If you have ap	oplied for this scholarship and were unsuccessful, you may apply again the	he following year if you so desire.
I have OR have	re not been convicted of a violation of the law (other than m	ninor traffic citations or similar).
		Scholarship Applicant