

**SEASIDE NEIGHBORHOOD ASSOCIATION
SCHOLARSHIP APPLICATION FORM
FOR STUDENTS ATTENDING SCHOOLS OTHER THAN SOUTH HIGH**
APPLICATION DUE DATE: **February 28, 2019**
**NOTE: SHS STUDENTS WHO SUBMITTED THE TUSD LOCAL SCHOLARSHIP
APPLICATION TO THEIR COUNSELOR ARE ALREADY ELIGIBLE.**

LAST NAME _____	FIRST NAME _____	MIDDLE _____
STREET _____	CITY _____	ZIP _____
BIRTH DATE: _____		BIRTHPLACE: _____
PHONE #: _____		EMAIL ADDRESS: _____
LIST ELEMENTARY, MIDDLE SCHOOL and HIGH SCHOOL ATTENDED .		
ELEMENTARY _____	YEARS _____	
MIDDLE _____	YEARS _____	
HIGH SCHOOL _____	YEARS _____	

PLACE CURRENT PHOTO
HERE

PLEASE DO NOT USE
STAPLES AND TAPE ALL
EDGES DOWN SECURELY

LIST COLLEGE CHOICES IN ORDER OF PREFERENCE:

	COLLEGE NAME / LOCATION
1.	_____
2.	_____
3.	_____
4.	_____

COURSE OF STUDY: _____

DESCRIBE YOUR CAREER PLANS AND REASON:

PARENTS/GUARDIANS WITH WHOM YOU LIVE:

MOTHER/GUARDIAN: PLACE OF EMPLOYMENT: CITY OF EMPLOYMENT: JOB TITLE: AGES OF BROTHERS AND SISTERS: NUMBER OF DEPENDENTS IN YOUR HOME (INCLUDE SELF, BUT NOT YOUR PARENTS): _____	FATHER/GUARDIAN: PLACE OF EMPLOYMENT: CITY OF EMPLOYMENT: JOB TITLE: NUMBER OF SIBLINGS IN COLLEGE: _____
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TWO PERSONS FURNISHING LETTERS OF RECOMMENDATION FOR THIS APPLICATION:

	NAME	ADDRESS	POSITION
1.	_____		
2.	_____		

NAME: _____

When evaluating applications, Seaside Neighborhood Association considers academic success in relationship to the strength of a student's academic program. Please provide information on your academic achievements and challenges. Consider the high school you attend and the program of studies you pursued. Include if you wish your weighted GPA and your class ranking, including number of students in the class.

When evaluating applications, SNA considers the whole student, including but not limited to his/her hobbies, extracurricular activities, family responsibilities, and paid and volunteer work. Please describe your non-academic experiences and what they have meant to you.

ACTIVITIES

NAME: _____

List activities and offices held in school and in the community. Include such involvement as athletics, student government, volunteer work, church, and paid employment.

School Related Activities:

(Check all years of participation)

	9	10	11	12
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Leadership:

(Check all years of participation)

	9	10	11	12
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Athletics:

(Check all years of participation)

	9	10	11	12
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Work experience (Paid employment only, include place, type of work and period of employment)

Community/Volunteer Service (outside of school activities)

Name of Organization	Job Description	Grade Levels of Participation	Number of weeks participating per school year	# Hours per week

Honors/Awards (Academic, Athletic and Other)

Determining Financial Need: The difference between what you can afford to pay for college and the total cost of college is called your "need." Although the questions below are optional, providing this additional information may enhance your application when applying for the SNA scholarship.

The Family Educational Rights and Privacy Act (FERPA)

The Family Educational Rights and Privacy Act (FERPA) sets out requirements that are designed to protect the privacy of students and their parents of record. Federal and California privacy regulations prohibit the disclosure of a student's financial aid information to anyone other than the student without the student's written permission except for the parent of a "dependent" student, a campus representative, or other designated officials. SNA will only disclose information as is allowed by FERPA. We will not disclose a student's information to a third party unless allowed by FERPA or designated in writing by the student (if over 18) or his/her parent/guardian.

I, _____ (Parent/Guardian/Student Over 18), hereby allow SNA to release personally identifiable student information to the SNA Scholarship Committee for the purpose of applying for needs-based college scholarships. I understand that if I refuse to give consent, this will not prevent me/my child from being considered by Seaside Neighborhood Association.

Number of family members in the household: _____

Number of college students in the household: _____

What is your parents' current marital status?

Married Single Divorced Separated Widowed

What is your parents' housing status?

Own their home Rent home Live with others Housing is provided by employer

Has your family joined Seaside Neighborhood Association? yes no

Estimate Total Annual Income (include father's income, mother's income, and all other taxable income):

- Less than \$6,000 \$6,000 to \$11,999 \$12,000 to \$23,999 \$24,000 to \$35,999
 \$36,000 to \$47,999 \$48,000 to \$59,999 \$60,000 to \$89,999 \$90,000 or more
 I cannot estimate my income

Estimate Total Cost of a Year at College (include tuition and fees, room and board, personal expenses, books and supplies): _____

Please provide additional information concerning your need as you view it.

APPLICATION DUE DATE: *February 28, 2019*

Send or drop off the completed application plus the required two letters of recommendation to

Seaside Neighborhood Association Scholarship Committee

c/o Tricia Blanco

22621 Gaycrest Ave., Torrance, Ca. 90505

Questions: Call Tricia Blanco at 310 -3160841