APPLICATION FOR SCHOLARSHIP 2020-2021

ADELINE NEILSON SCHOLARSHIP FOUNDATION
PO BOX 1804
JACKSON, WYOMING 83001-1804 ansfnd@gmail.com

DEADLINE FOR APPLICATION: Must be postmarked by **April 18, 2020**

Scholarships are available to full time students attending: college (graduate or undergraduate), junior college, trade or technical schools. Each scholarship is for one academic year. Students may apply each year whether or not they have received a scholarship in prior years.

Each application will be evaluated based on the following criteria: ability to follow instructions, economic need, initiative in class work, grades, goals, and the completeness of this application.

IMPORTANT! IMPORTANT! IMPORTANT!

THE SELECTION COMMITTEE WILL NOT CONSIDER ANY APPLICATION UNLESS IT IS COMPLETED IN ACCORDANCE WITH THE INSTRUCTIONS BELOW

Instructions for completing this form:

Put an X in the boxes to the left as you complete each instruction.

- ❑ Fill in **all** applicable sections of this three-page form. Attach 4th page (see General Questions section.)
- ❑ Answer **General Questions** on page 2 and on the separate sheet in **your own handwriting**.
- ❑ Attach transcripts of grades for your most recent academic **year**
- ❑ Attach copies of and circle all applicable test scores {ACT, SAT, PSAT/ NMSQT, GRE, other} (see page 2)
- ❑ Attach copy of applicable U.S. Federal Income Tax Return (see page 3)
- ❑ Sign Applicant's Certification at the bottom of Page 3.
- ❑ Mail **all** the above in **one** envelope to: Adeline Neilson Scholarship Foundation at the address above

Applicant Information

Name_____ **Age** _____ **Last 4 digits Social Security No.** _____
Last *First* *M.I.*
Mailing address_____**City**_____**State**___**Zip**_____

Phone (____) _____ **Date of birth**_____ **Email address**_____

Name of College/School where You Will Use this Scholarship

Name_____ **Date you will enroll**_____

Your Student ID # _____

The successful applicant's scholarship will be paid **directly to the college/school** in the fall of 2020 after verification of financial information in the next section. However, **it is the applicant's responsibility to provide the correct address and to have the Financial Aid Officer/Administrator notify us in writing that he or she has registered and is a full-time student.**

2020-2021 Financial Information

Estimated Costs	Cost Amount
Registration and tuition	**$**
Books and supplies	
Room and board, if not living at home: **on** campus	
Room and board, if not living at home: **off** campus	
Total Estimated Costs (A) (Must equal **Total Sources (B)** below)	**(A) $**

Sources of Money for Your Education Expenses	Amount
Applicant and/or spouse	**$**
Parent(s) or Guardian	
All loans	
All scholarships (excluding this application) (To be verified before award of this scholarship)	
All other sources	
Remaining amount needed	
Total Sources (B) (Must equal **Total Est. Costs (A)** above)	**(B) $**

General Questions

Important: Answer these questions **in your own handwriting**. Use more paper if needed.

Which school subjects have you enjoyed the most? Why? _____

_____

_____

What work experience has been most meaningful to you? Why? _____

_____

_____

What is your most satisfying accomplishment (in or out of school)? Why? _____

_____

_____

Will your family help fund your education? Why or why not?_____

_____

_____

ON A SEPARATE SHEET OF PAPER, **hand-write** at least two paragraphs explaining what you would like to do when you are finished with your schooling. Attach the sheet as the 4th page of this application.

High Schools and Colleges/Universities Attended

Name	HS	College	Period Attended

Test Scores

For each test you have taken, fill in your score here and circle the score on the page you attach.

Name of Test	Score	Name of Test	Score
ACT		GRE	
SAT		GED	
PSAT/NMSQT		Other	

Two References (excluding anyone related to your family**)**

Name_____ Phone ( ) _____
Mailing address_____City_____State____Zip_____
Name_____ Phone ( ) _____
Mailing address_____City_____State____Zip_____

List anything else you would like the Selection Committee to know as they consider your application.
_____
_____
_____

What is your EFC (Expected Family Contribution) from your FAFSA application? _____
Any discrepancy between the EFC above and the EFC later reported to us by your school may disqualify you from receiving funds from this Foundation. Wait until you have your EFC to file this application. Be accurate.

If you ARE a dependent of your parent(s) (are claimed on your parent(s)' Federal Income Tax Return), fill out this Section A and attach a copy of your parents 2019 tax return.
If you are NOT a dependent, skip to Section B.

SECTION A – Family Information for Students claimed as Dependent on parent(s)' return

Father's/Guardian's Name_____ Home Phone ( ) _____
His Address_____City_____State ____Zip_____
Employer_____Title_____Work Phone ( )_____
Mother's Name_____ Home Phone ( ) _____
Her Address_____City_____State ____Zip_____
Employer_____Title_____Work Phone ( ) _____

Number of Brothers and/or Sisters: Living at home _____ Away at college/school _____

IMPORTANT – Attach a copy of your parents' Federal Income Tax Return for 2019

If you are NOT a dependent of your parent(s) (ARE NOT claimed on your parent(s)' Federal Income Tax return), fill out this Section B and attach a copy of your own 2019 tax return.

SECTION B – Family Information for Students NOT claimed as Dependent on parent(s)' return

Spouse's Name_____ Home Phone ( ) _____
Address_____City_____State____Zip_____
Employer_____Title_____Work Phone ( ) _____

Number of children and other dependents: _____

IMPORTANT – Attach a copy of your Federal Income Tax Return for 2019

Applicant's Certification

I declare that the information given in this application is, to the best of my knowledge and belief, true, correct, and complete, realizing that any false or misleading information will disqualify me as an applicant**. I also declare** that I have followed the "**Instructions for completing this form**" on page one and that **all handwriting on this application is my own**.

_____
Signature

Notifications will be mailed to all applicants by June 15, 2020.