

# SCHOLARSHIP APPLICATION

Today's Date \_\_\_\_\_

## HAVE QUESTIONS OR NEED ASSISTANCE WITH YOUR APPLICATION?

Please call 209-403-5654 or email us at [Director@MaryGrahamFoundation.org](mailto:Director@MaryGrahamFoundation.org)

Please mark what date you will begin school. If you are already enrolled, mark the start of the next semester.

**Summer** \_\_\_\_\_  **Fall** \_\_\_\_\_  **Spring** \_\_\_\_\_  
(YEAR) (YEAR) (YEAR)

## ELIGIBILITY

- 1. I am currently or have been in foster care.  YES  NO  
Who is your social worker? \_\_\_\_\_
- 2. I currently live in San Joaquin County.  YES  NO
- 3. I do NOT currently live in San Joaquin County, but was in foster care in San Joaquin County.  YES  NO
- 4. Attached is a copy of my Ward of the Court letter.  YES  NO  
If you need a copy of this letter, please request a copy via email at [Director@MaryGrahamFoundation.org](mailto:Director@MaryGrahamFoundation.org)

## PERSONAL INFORMATION

NAME: Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Social Security Number \_\_\_\_\_ Age \_\_\_\_\_ Birth date \_\_\_\_\_ Telephone (Area Code + Number) \_\_\_\_\_

ADDRESS: Street/PO Box \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email Address \_\_\_\_\_

## EDUCATIONAL BACKGROUND Please attach a copy of your transcript.

**A:** I am currently in HIGH SCHOOL  **B:** I am currently in COLLEGE  **C:** NEITHER A or B

**A:** I will graduate from (Name of High School, City and State): \_\_\_\_\_ Date:(Mo/Yr) \_\_\_\_\_

**B:** I am enrolled at (Name of College, City and State) \_\_\_\_\_

**C:** If not in school, tell us what you are doing. \_\_\_\_\_

*The Foundation does not currently fund scholarships for graduate school.*

## CURRENT/FUTURE EDUCATIONAL PLANS

I plan to attend/am enrolled at (Name of College/Vocational School, City and State): \_\_\_\_\_

I have applied for admission.  YES  NO If yes, I have been accepted.  YES  NO

I have applied for financial aid.  YES  NO I have applied for the Chafee Grant.  YES  NO

## EMPLOYMENT EXPERIENCE

Are you working now?  YES  NO If yes, how many hours per week? \_\_\_\_\_

If yes, where? \_\_\_\_\_

Title \_\_\_\_\_ Job duties \_\_\_\_\_

Do you plan to continue to work during school?  YES  NO



**PERSONAL STATEMENTS**

INSTRUCTIONS: Thoughtfully and thoroughly answer the following questions in the space provided below and attach additional pages if necessary.

***What achievements, activities, experiences, etc. do you think best qualify you for this scholarship?***

***What are your educational and career goals?***

**Describe your current support system** (Biological and/or foster, family, teachers, social worker, friends, etc.)

**List additional extracurricular activities here** (clubs, jobs, teams, volunteering, etc.)

Name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_  
(If emailing - please type your name on both lines.)

