



ESCONDIDO ALUMNAE PANHELLENIC SCHOLARSHIP APPLICATION

INSTRUCTIONS: Complete ALL portions of the application. If an item does not pertain to you, please put N/A or a dash on the line so we are aware that no answer applies. PLEASE TYPE OR PRINT CLEARLY.

GENERAL INFORMATION

Last Name: _____ First Name _____ M.I: _____

Birthdate: _____

National Panhellenic Conference Sorority: _____ Initiation Date: _____

Home Phone: _____ Mobile Phone: _____

Email Address (checked all year round): _____

Parents Names: _____

Home/Summer Address: _____

City: _____ State: _____ Zip: _____

School Year Address (Fall term): _____

City: _____ State: _____ Zip: _____

High School: _____ Year Graduated: _____

COLLEGE/UNIVERSITY INFORMATION:

College: _____

College Address: _____

City: _____ State: _____ Zip: _____

Year in School (must be a Junior or Senior currently): _____ Expected Grad Year: _____

Upper Division Units Earned (by this upcoming June): _____ Total needed to graduate: _____

Major(s): _____ Minor(s): _____

Cumulative College GPA: _____ Number of Credits to be taken in the Fall /Spring: _____

How many credits qualify you for full-time enrollment? _____

FINANCIAL INFORMATION

ESTIMATED EXPENSES FOR THE SCHOOL YEAR

- Semester Budget
 - Tuition \$ _____
 - Room/Boarding \$ _____
 - Books/Supplies \$ _____
 - Sorority Dues/Expenses \$ _____
 - Transportation/Parking \$ _____

AMOUNT OF INCOME AVAILABLE THIS YEAR

- Parent's Contribution \$ _____
- Student Contribution (employment) \$ _____
- Scholarships & Grants \$ _____
- Miscellaneous* \$ _____

Are you employed during the school year? _____ Yes _____ No

Place of employment: _____ Hours/week: _____

Employment: (Check one) _____ year round _____ summer/seasonal

Average # of hours per week: _____ Approximate salary: _____

Number in family, including parents(s) : _____ Age of sibling(s): _____

FINANCES List scholarships, grants, loans received currently, giving amount, source and duration.

Other financial information you would like considered:

Explain any special need for this scholarship: _____

Will you be taking an Internship next Fall? YES NO next Spring? YES NO

Will your Internship be PAID or UNPAID? _____

Will you be a Full-Time Undergraduate Student (12 hours or more OR as defined by your college/university)?

Upcoming Fall Term? YES NO Next Year Spring? YES NO

COLLEGIATE ACADEMIC HONORARIES AND RECOGNITIONS

