



**EDUCATION:** List all high schools and colleges attended:

Name	City & State	From – To (month & year)	Major	Degree anticipated Kind	Date
High School(s)		/ - /	NA		
		/ - /	NA		
College(s)		/ - /			
		/ - /			
Special Study		/ - /			
		/ - /			

**FATHER, STEPFATHER, OR MALE GUARDIAN**

**MOTHER, STEPMOTHER, OR FEMALE GUARDIAN**

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Street: \_\_\_\_\_

Street: \_\_\_\_\_

City & State: \_\_\_\_\_ Zip: \_\_\_\_\_

City & State: \_\_\_\_\_ Zip: \_\_\_\_\_

Occupation: \_\_\_\_\_ Title: \_\_\_\_\_

Occupation: \_\_\_\_\_ Title: \_\_\_\_\_

Employed By: \_\_\_\_\_ No. of Yrs. \_\_\_\_\_

Employed By: \_\_\_\_\_ No. of Yrs. \_\_\_\_\_

**PARENT'S ASSETS AND INDEBTEDNESS**

Home if owned or being purchased – monthly mortgage payments: \$ \_\_\_\_\_

If Renting – monthly rent: \$ \_\_\_\_\_

Other Real Estate: \_\_\_\_\_

Investments (stocks, bonds, and other securities): \_\_\_\_\_

Business or farm if owned: \_\_\_\_\_

Unusual Expenses: (use separate sheet)

Other Significant Debt: (use separate sheet)

**FAMILY HISTORY**

Names of siblings	Age	School, college, or place of employment	Marital status
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

For those siblings attending college or university, indicate year of graduation, cost, and any financial aid received.

College

YOG

Cost Per Year

Financial Aid

**STUDENTS TOTAL RESOURCES**

**IF APPLICANT IS AN ENTERING FIRST-TIME STUDENT, COMPLETE ONLY THE ESTIMATED COLUMN.**

Resources are for:

Actual 20\_\_ 12 months Estimated 20\_\_

Resources from parents or guardian

Grants or scholarships (list sources)

Savings from full or part-time employment

Veterans – GI Bill Benefits

Social Security Benefits

Educational Loans

Other Sources (list below)

TOTAL \$ \_\_\_\_\_ \$ \_\_\_\_\_

\*Include in the estimated column: the grants, scholarships, and loans you have actually have been awarded.

Employment: Describe and give dates for full or part-time employment during high school and college.

List any scholarships (sources and amount), prizes, honors, and awards you have received as an undergraduate.

List extracurricular activities (athletics, dramatics, college organizations, service clubs, community projects, etc.)

Indicate your membership in honorary societies, other organizations and any offices held.

APPLICATIONS WILL BE DENIED IF REQUESTED INFORMATION IS NOT RECEIVED IN THE PILGRIM FOUNDATION OFFICE BEFORE THE DEADLINE OF APRIL 1 FOR HIGH SCHOOL APPLICANTS OR MAY 1 FOR HIGHER EDUCATION APPLICANTS.

### STATEMENT OF APPLICANT

I hereby affirm that all information supplied by me is accurate and that this application will remain the property of The Pilgrim Foundation.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant

### STATEMENT OF PARENT AND/OR GUARDIAN

If the applicant is self-supporting, check here  and sign.

I certify that the information provided is correct and financial assistance is necessary.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent/Guardian or Applicant if self-supporting

ALL INFORMATION WILL BE CONSIDERED AS CONFIDENTIAL BY THE PILGRIM FOUNDATION AND ITS SELECTION COMMITTEE. FINANCIAL AID WILL BE ONE OF THE CRITERIA CONSIDERED BY THE SELECTION COMMITTEE.

### ? HAVE YOU INCLUDED ?

- Completed application form (Application will not be considered if incomplete.)
- Letter of application
- Income Tax Return of Parent/Guardian or Self-Supporting Applicant or Student Aid Report
- Copy of official high school transcript or official college transcript
- Letter of college acceptance

NOTICE: You may also email your application to [Pilgrimfoundation@comcast.net](mailto:Pilgrimfoundation@comcast.net)