

# PHS GENERIC APPLICATION

## PEMBROKE HIGH SCHOOL SCHOLARSHIP APPLICATION

### NAME OF SCHOLARSHIP **PEMBROKE POLICE ASSOCIATION**

The Pembroke Police Association Scholarship will be awarded to a PHS graduating senior who plans to further his or her education in Criminal Justice or Law Enforcement. The scholarships will be awarded in the amount of \$500.00 Return applications to: Mrs. Webb in the Guidance Department **DEADLINE APRIL 1,2024.**

PLEASE FILL THIS FORM COMPLETELY, ACCURATELY, AND NEATLY—TYPE OR USE BLACK INK.

**PLEASE INCLUDE A UNOFFICIAL TRANSCRIPT**

FULL NAME \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

HIGH SCHOOL ATTENDING \_\_\_\_\_

WHAT CAREER DO YOU WANT TO PURSUE AFTER YOU FINISH COLLEGE?

\_\_\_\_\_

COLLEGES TO WHICH YOU HAVE APPLIED:

\_\_\_\_\_

COLLEGES TO WHICH YOU HAVE BEEN ACCEPTED:

\_\_\_\_\_

1<sup>st</sup> COLLEGE CHOICE: \_\_\_\_\_ TUITION: \_\_\_\_\_

2<sup>ND</sup> COLLEGE CHOICE: \_\_\_\_\_ TUITION: \_\_\_\_\_

3<sup>RD</sup> COLLEGE CHOICE: \_\_\_\_\_ TUITION: \_\_\_\_\_

LIST ALL SCHOLARSHIPS, GRANTS, AND FINANCIAL AID WHICH YOU HAVE BEEN AWARDED.

\_\_\_\_\_

\_\_\_\_\_

TOTAL AID: \_\_\_\_\_

ESTIMATED PARENTAL CONTRIBUTION: \_\_\_\_\_

ESTIMATED STUDENT CONTRIBUTION: \_\_\_\_\_

ANTICIPATED FINANCIAL NEEDS: \_\_\_\_\_

\_\_\_\_\_

DO YOU OWN A CAR? \_\_\_\_\_ WILL YOU COMMUTE TO COLLEGE? \_\_\_\_\_

**PERSONAL**  
**INFORMATION**

NAME OF FATHER OR GUARDIAN: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

NAME OF MOTHER OR GUARDIAN: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

FATHER'S OCCUPATION: \_\_\_\_\_

EMPLOYED BY: \_\_\_\_\_

MOTHER'S OCCUPATION: \_\_\_\_\_

EMPLOYED BY: \_\_\_\_\_

TOTAL NUMBER OF PERSONS DEPENDENT ON PARENTS (INCLUDES SELF AND PARENTS): \_\_\_\_\_

NAMES/AGES OF FAMILY MEMBERS ATTENDING COLLEGE: \_\_\_\_\_

LIST ALL SCHOOL AND COMMUNITY ACTIVITIES, HONORS, PRIZES HELD, OFFICES HELD:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**WORK EXPERIENCE**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

IN THE SPACE BELOW, STATE WHY YOU ARE APPLYING FOR FINANCIAL AID, TO ASSIST US IN MAKING AWARD DECISIONS. FEEL FREE TO USE AN ADDITIONAL PAGE IF YOU NEED ADDITIONAL SPACE. PLEASE BE AS SPECIFIC AS POSSIBLE

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I AFFIRM THAT THE ABOVE INFORMATION IS CORRECT AND THAT I WISH TO BE CONSIDERED FOR A SCHOLARSHIP TO HELP FUND POST GRADUATE EDUCATION EXPENSES.

PARENT SIGNATURE: \_\_\_\_\_ RSTUDENT SIGNATURE: \_\_\_\_\_