

East
West

ANN SAUGSTAD MEMORIALSCHOLARSHIP APPLICATION
2025 - 2026



GPA: _____ Rank: _____ ACT Composite Score: _____

of AP classes: _____ # of Honors classes: _____ NHS: Y or N _____ # of Volunteer Hours: _____

Applications & checklist are due to Ms. Mueller in the Career Readiness Center by February 12, 2026.

THIS APPLICATION IS TO BE COMPLETED BY THE STUDENT. (PARENTAL HELP IS ALLOWED ON THE FINANCIAL SECTION.)

Please attach a formal senior picture here.

(Staple or Scotch tape.)

Name: _____

Address: _____

City, State, Zip Code _____

Phone _____

E-mail address: _____

Birth date _____

Father's Name: _____

Mother's Name: _____

Occupation _____

Occupation _____

Place of Employment _____

Place of Employment _____

Address _____
(If different than yours.)

Address: _____
(If different than yours.)

Names and ages of all brothers and sisters and the school they are currently attending.

Name	Age	Name of Current School

How many years have you attended the West Bend High Schools? _____

Tentative field of study: _____

List the colleges/universities that you have applied to as of January 15. (RANK THEM.)

College/University	Accepted	Have not heard	Wait List

Are there any other colleges/universities you will apply to? Y or N _____

List: _____

What have you done in the area of this interest (i.e. jobs, classes, projects, volunteer work, etc _____

Are you the first in your family to attend a college/university? (Education beyond high school) Y or N ____

Elementary school you attended? _____

Middle school you attended? _____

Part-time jobs you have held or are now holding?

Where	Position Held	From _____ to _____

Leisure time activities/hobbies: _____

Financial Page

Have your parents filed or do they intend to file the FAFSA? Yes _____ No _____ After you have received your FAFSA confirmation e-mail, what is your family EFC (Expected Family Contribution)

Financial Hardships

1. Do you have any unusual financial need? Yes _____ No _____
2. If yes, then explain. You can expect to be asked to explain further your financial need in the interview.

Expenses At the School You Plan to Attend

(Only fill in as many choices as needed.)

	1st Choice	2nd Choice	3rd Choice
Name of College or University			
Tuition for one year			
Room & Board for one year			
Total cost for one year			

How will you pay for your education?

Do you plan to work while attending school? Yes _____ or No _____

Do you plan to work in the summers while you go to school? Yes _____ or No _____

Personal savings (Include any money in an EdVest College Savings Plan) Yes _____ or No _____

Annual Family Contributions _____

(How much financial support have your parents tentatively committed to your education on an annual basis?)

Scholarships you have already been awarded? List and include the amount.

Scholarship	Amount

1. ATTACH THE VOLUNTEER SERVICE REPORT TO YOUR APPLICATION.

2. List all in-school activities (include sports, music, student government and other clubs), the grades you participated (9th, 10th, 11th, 12th) and any offices you held:

In-School Activity	Grade	Office Held

3. List all out-of-school activities, i.e. lessons, clubs, club sports, etc.:

Non-school Activity	Year ___ to ___	Time Involved

4. List any honors, awards, or recognitions you have received both in-school and out of school during your high school years:

Honors / Awards / Recognitions	Honors / Awards / Recognitions

Will you be taking a gap semester or gap year after high school? Yes ___ or No ___

If so, what are your plans?

Authorization for release of records: I authorize the release of my academic records, grade point average, rank in class, and test scores to the scholarship committees. If your application does not have a parent signature or is not complete, your application may be disqualified.

My signature below also indicates that I have completed this application myself accurately and truthfully. I authorize the Scholarship Committee to clarify my involvement in school activities as listed above by contacting my counselor or activity advisor as needed. Understand that misrepresentation of factual information herein will cause my application to be withdrawn. Furthermore, if I am a recipient of a scholarship, I give permission for any of the committees to keep a copy of my application for historical purposes. I also understand that if my school choice or career plans change, I may be forfeiting a scholarship for which I have been chosen.

Signature of Applicant

Date _____

Signature of Parent _____

Date _____
