Hood County Children's Charity Fund
2026 Scholarship Application

Hood County Children's Charity Fund scholarships are given to students applying to a trade school, vocational school, technical institute or a two-year college vocational program.

Please return completed and signed application to your school counselor no later than April 9th.

Student Information

Name: _____

Address: _____ City: _____ State: ___ Zip: _____

Phone: _____ Cell ___ Home ___ Date of Birth: _____ Age: _____

Email address: _____

Personal Information

Please list the person(s) with whom you reside (mother, father, guardian, relative, friend):

Name: _____ Relationship: _____

Occupation: _____ Employer: _____

Name: _____ Relationship: _____

Occupation: _____ Employer: _____

Name: _____ Relationship: _____

Occupation: _____ Employer: _____

Number of brothers/sisters: _____ Ages: _____

Do you have other household family members attending college next year? _____

School Application

School you plan to attend: _____

What is your proposed focus of study? _____

How long is the program? _____

What is the cost of the program? _____

Have you applied? yes ___ no ___ Have you been accepted? yes ___ no ___

Financial Information

Are there additional school expenses beyond the cost of the program? yes ___ no ___

If so, for what and how much? _____

Do you plan to work while in school? yes ___ no ___ If not, why not? _____

Do you and/or your family have funds set aside for school expenses? yes ___ no ___

Have you applied or will you apply for additional financial aid? yes ___ no ___

If so, what type of aid have you applied for? _____

Current family annual income:

Less than $25,000 ___ $25,001-$40,000 ___ $40,001-$55,000 ___ $55,001-$70,000 ___ Above $70,000 ___

Essay

On a separate page, tell us about yourself, your goals for the future and how you plan to achieve them.

Signature: _____ Date: _____

--- For Office Use Only ---

Date Received: _____ HCCCF Board Member signature: _____

Date Awarded: _____



Amount Awarded: _____

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