

Scholarship Application

APPLICANT INFORMATION

 First Time Applicant Renewal

Name: _____ Date: _____

Current address: _____

City: _____ State: _____ ZIP Code: _____

Phone: _____ Email: _____

PROGRAM HISTORY

MHY Residential Placement Dates: _____ Admission Date: _____ Discharge Date: _____

MHY Non Residential Program _____ Start Date: _____ End Date: _____

 Applicant was Discharged to: Family Foster Care More Restrictive Institutional Setting Less Restrictive Institutional Setting Independent Living

SCHOOL HISTORY

High School Attended: _____ Date of Graduation: _____

Address: _____ Phone: _____

City: _____ State: _____ ZIP Code: _____

List of Honors/ Awards/ Extracurricular Activities: _____

HIGHER EDUCATION INFORMATION

I have been accepted or applied at the following school of higher education in Pennsylvania:

School: _____ City: _____

 I will attend school full-time: Yes No Application is for school year beginning: _____ Month/Year

Anticipated Month/Year of Graduation _____ Major: _____

List other known/anticipated financial assistance, including loans, grants, scholarship and awards:

<u>Aid</u>	<u>Amount</u>
_____	_____
_____	_____
_____	_____

Estimated School Expenses (for one school year)

Tuition	\$ _____
Room & Board	\$ _____
Books & Supplies	\$ _____
Personal Expenses	\$ _____

Essay- Use the following space or attach a one page typed essay addressing the following topic:

Describe your educational goals and expectations.

Applicant Signature

Mail application to:
MHY Family Services
Attn: Amsler-Scott Scholarship
521 Route 228 Mars, Pa 16046