



NORTHLAND CHAPTER

Name: _____

Address: _____

Phone Number: () ____ - ____ Birthday ____/____/____ (month/day/year)

Parent(s): _____ Phone: () ____ - ____

Church I Attend (include city/state): _____

High School: _____ H.S. Graduation Date: ____/____/____

At F.C. this will be my: first year () second year () third year () fourth year ()

With the help of your parents where needed, please answer the following questions:

(Note: This application will not be opened or read by anyone except the 3 person Scholarship Committee, as appointed by the Northland Chapter)

CLUB ACTIVITY

1. How long (if any) have you and/or your family been members of the Florida College Booster Club (FCBC) – Northland Chapter?

2. What have you and / or your family done to assist the Northland FCBC in its efforts to help young people attend Florida College?

ACADEMIC

3. What, if any, academic plans do you have beyond Florida College?

4. What is your Grade Point Average (GPA)? ACT score? SAT score?

FAMILY NEED

5. How many children are in your family who still live at home? _____ Attend college? _____

6. What is the combined annual income of your family as reported on latest IRS 1040 Form _____ (AGI – Adjusted Gross Income):

Father: \$ _____ Mother: \$ _____ You: \$ _____ Total: \$ _____

7. Do you expect other scholarships? _____ If so, how much? \$ _____

PERSONAL INITIATIVE

8. How much money have you personally saved for college? \$ _____

GENERAL

9. Are there any special circumstances which the Scholarship Committee should be aware of concerning your application request?

10. Please write a brief paragraph expressing in your own words why you want to attend Florida College. Include what you hope to gain from your FC education and your college experience, along with why you need financial help to attend FC.

Signature of Applicant: _____

Mail Application To:

FC Scholarship Application

1164 Charlton Street

West St Paul MN 55118

OR e-mail to Jaime@chuesslers.Net

Due Date: June 1st