**APPLICATION FOR 2024 FUERST SCHOLARSHIP (Graduates)**

*This application is for Novi community members who have already graduated high school and are still pursing their first post-high school degree.* ***If you are a current Novi High School senior, please complete the Local Application via Schoology****. Past recipients can receive it up to two times. After you complete this form, email to nef@novik12.org.*

**STUDENT: FILL OUT THIS SECTION COMPLETELY**

1. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  *(Last) (First) (Middle)*

2. Home address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  *(Number & Street) (City) (Zip code)*

 Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell: \_\_\_\_\_\_\_\_\_\_\_\_

Grade entered Novi Schools: \_\_\_\_\_\_

Year Graduated from Novi High School: \_\_\_\_\_\_\_\_\_

3. School of applicant’s choice for which scholarship is requested: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Have you been accepted to this school? \_\_\_\_\_\_\_\_\_\_

 What course of study will you pursue? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 What financial aid have you been offered? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Please use the following space to give any information which you believe may help the committee

 evaluate your application. What are your goals? What is your chief personal strength?

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| **Extracurricular Activities (clubs, athletics, etc.)** |
| **Organization Name**Ex. debate, soccer, etc. | **Role/Year/School**Ex. Member/2023/MSU | **Description of Activities**Ex. Hosted speech tournament, played forward | **Hrs. Per Week/ Wks. Per Year**3/32=3 hrs per wk & 32 wks. per yr. |
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| **Community Service/Volunteer Work** |
| **Organization Name** | **Your Specific Role/Duties** | **Dates From-To** | **Hrs. per week/Wks. per year** |
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| **Honors/Awards** |
| **Honor/Award Name** | **Description** | **Date/Year** |
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| **Employment/Internships/Summer Activities** |
| **Job/Title** | **Specific Duties** | **Dates From-To** | **Hrs. Per week** |
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**PARENT/GUARDIAN: FILL OUT THIS SECTION COMPLETELY**

Parent/Guardian Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone/Cell: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone/Cell: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does student live with both parents/guardians? \_\_\_\_\_ Yes \_\_\_\_\_ No

 If no, with whom does student live? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Names, ages and grade levels of other children in the family:

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 Are there other children in college? If yes, where do they attend and when will they graduate?

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Family income before taxes for the last year was:

 \_\_\_\_\_ under $50,000 \_\_\_\_\_ $90,000 - $125,000

 \_\_\_\_\_ $50,000 - $90,000 \_\_\_\_\_ over $125,000

Please indicate below any information that would demonstrate that financial need exists.

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Please use this space for any additional information you wish the committee to have:

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