**Text

Description automatically generated**

**Graduating Senior Scholarship Application**

**Westborough High School**

**Assabet Valley Voc.**

**WASA/Prototype Training System Partnership**

**Deadline for Filing is April 30, 2024**

Application pertains to students attending an accredited two-year or four-year college. Financial award will be paid to the winning candidates upon notification.

|  |  |
| --- | --- |
| **Student Information** | |
| Full Name: | Email address: |
| Home Address: | Phone # |
| Father: | Occupation: |
| Mother: | Occupation: |
| Family members attending college next year  (number only): |  |
| **Expected college expenses** | |
| Tuition: $ | Room and Board: $ |
| Books and Lab Fees: $ | Transportation: $ |
|  | Total Expenses: $ |

|  |  |
| --- | --- |
| **Family Gross Income Level** | **Check appropriate** |
| Below $50,000 | ☐ |
| $50 - $100K | ☐ |
| $100K - $150K | ☐ |
| $150K - $200K | ☐ |
| $200 - $300K | ☐ |
| $300K + | ☐ |

Have you worked while attending High School? Yes ☐ No ☐

|  |  |
| --- | --- |
| **Company Name** | **Job Description** |
|  |  |
|  |  |
|  |  |

Explain the type of work experiences:

|  |
| --- |
|  |
|  |
|  |
|  |

Please list activities that you have been involved with during High School: *Please note: The level refers to the type of activity, was it school sponsored, recreation/AAU/Club/Other Freshman/JV/Varsity – Please denote any special distinctions - Captain, MVP, League All Star.*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | | **Frosh** | **Soph** | **Junior** | **Senior** |
| FALL | Activity |  |  |  |  |
| Level |  |  |  |  |
| Distinctions |  |  |  |  |
| WINTER | Activity |  |  |  |  |
| Level |  |  |  |  |
| Distinctions |  |  |  |  |
| SPRING | Activity |  |  |  |  |
| Level |  |  |  |  |
| Distinctions |  |  |  |  |
| SUMMER | Activity |  |  |  |  |
| Level |  |  |  |  |
| Distinctions |  |  |  |  |

National Honor Society member? Yes ☐ No ☐

Student Council member? Yes ☐ No ☐

Please list other scholarships or financial assistance you are receiving including specific dollar amounts:

|  |  |
| --- | --- |
| **Name** | **Amount** |
|  |  |
|  |  |
|  |  |

Please list any additional factor(s) or financial considerations that will assist the WASA Scholarship Committee in weighing your situation to determine your qualification for this scholarship assistance. Please include all community service work and projects.

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

**\*\* Please remember to include a copy of your current Senior term grades. Your application will not be considered without it.** Full transcript required.

|  |  |  |
| --- | --- | --- |
| Applicant’s signature |  | Date |
| Father/Guardian signature |  | Date |
| Mother/Guardian signature |  | Date |

**BE ASSURED THAT ALL THE ABOVE INFORMATION IS STRICTLY CONFIDENTIAL**

Please email or return to below address:

[Mhiggins3386@gmail.com](mailto:Mhiggins3386@gmail.com)

Westborough Athletic and Social Association

P.O. Box 165

Westborough, MA 01581

Attn: Scholarship Committee