

**2016 UPPERCLASS APPLICATION FOR GEORGE O. SMITH SCHOLARSHIP
For STUDENTS MAJORING IN PHYSICAL SCIENCES OR ENGINEERING
DEADLINE FOR RETURN: April 18, 2016**

Lexington Scholarship Awards Night ♦ June 7, 2016 ♦ 7:30 PM Cary Hall

Return application and accompanying materials to: LSF, 33 Oak St., Lexington, MA 02421

Name of Student _____ Email _____ Cell Phone _____

Home Address _____ Home phone _____

High School Attended _____ Graduation date _____ Expected college graduation date _____

PART I – INFORMATION TO BE PROVIDED BY STUDENT

This past year I attended the following college: _____

Next year I will attend the following college: _____

I am currently in good academic standing (if no, explain): YES NO _____

Cost to attend 2016/2017:

Tuition and fees	\$ _____
Housing (if resident)	\$ _____
Meals (if resident)	\$ _____
Commuting (if non-resident)	\$ _____
Books	\$ _____
Other (specify)	\$ _____
A: Total College Expenses	\$ _____

Resources

From college financial aid grant(s) and scholarships(s)	\$ _____
From college financial aid loan(s)	\$ _____
From college financial aid work study	\$ _____
From school year job	\$ _____
Anticipated summer earnings	\$ _____
From parent resources	\$ _____
From other sources (specify source and amount)	\$ _____
B: Total resources	\$ _____

Funds Needed (A minus B): \$ _____

YOU MUST PROVIDE COLLEGE FINANCIAL AID AWARD LETTER

Please answer the following questions on a separate sheet of paper:

1. What is your major?
2. List your college extra-curricular and community activities.
3. Describe your past and current work experience and community service including dates.
4. List other scholarships expected.
5. Any special awards or recognition received from school or community?

Student Signature: _____ Date: _____

**For more information or forms, look for us on our web site: www.lexscholarship.org
NOTE: NO applications will be considered without parent IRS 1040 and student IRS 1040
STUDENT BIRTH CERTIFICATE IS REQUIRED – MOTHER MUST HAVE BEEN
LEXINGTON RESIDENT AT TIME OF APPLICANT'S BIRTH**

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PART II – FINANCIAL INFORMATION TO BE PROVIDED BY PARENT OR GUARDIAN

	Father or Guardian	Mother or Guardian
Name	_____	_____
Address	_____	_____
	_____	_____
Employer	_____	_____
Address	_____	_____
	_____	_____
Position held	_____	_____
Income, pre-tax	_____	_____

Tax appraisal of primary home _____ Unpaid mortgage _____

Value of 2nd home (if applicable) _____

Bank accounts:

Checking balance	\$ _____	Stocks & bonds & other assets (rental property)	(market value) \$ _____
Savings balance	\$ _____	529 account for college	\$ _____

Expected contribution to student from: income \$ _____ assets \$ _____

List current large expenses, debts or loans

Are there any unusual family circumstances or previous major expenses which should be considered when reviewing this application?

List all children and any other dependents:

Name	Age	School & Class or occupation	Amount parents have contributed toward college or special ed.	Amount parents have borrowed toward college or special ed.
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INFORMATION CONTAINED IN THIS APPLICATION WILL BE TREATED AS CONFIDENTIAL.
The foregoing statements are true to the best of my knowledge. I am unable to provide more funds than shown on Page 1 of this statement and I request financial aid.

Date _____ Signature of Parent(s) or Guardian _____

***** If this student is awarded a scholarship, the student or someone from the family must attend the Awards Night to accept the award. *****

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