

**Community Foundation of Greater New Britain, College Scholarship Application
Virginia and William Bray Scholarship** **Page 1 of 4**

(If you need extra space in any section of this application, use additional sheets of paper, making sure you put your name, address and "Bray Scholarship" on each page.)

Application must be received by March 31

APPLICANT DATA

Last Name _____ First _____ M.I. _____

Permanent Home Mailing Address _____ Apt. # _____

City _____ State _____ Zip _____

Telephone () _____ Email Address _____

PARENT OR GUARDIAN INFORMATION (if applicant is under 21 years of age)

Father, stepfather, or male guardian:

Name _____

Address, if different _____

Occupation: _____ Employed by: _____

Mother, stepmother, or female guardian:

Name _____

Address, if different _____

Occupation: _____ Employed by: _____

HIGH SCHOOL INFORMATION

School Name _____ Graduation Date ____/____/____
Month Day Year

City _____ State _____

ADDITIONAL INFORMATION

What is your intended program of study or career pursuit?

COLLEGE INFORMATION

Name of the college/university, or other institution you plan to attend.

_____ City _____ State _____

Community Foundation of Greater New Britain, College Scholarship Application

All information contained in this application is Confidential.

FINANCIAL DATA

Figures should be taken from your most recent U.S. Income Tax Return. **To be considered for an award, this section must be filled out completely.**

____ I am an independent student. The data below represents my finances.

____ I am a dependent student. The data below represents my parents' finances.

Town and State of Residence _____

Adjusted Gross Income (Form 1040) \$ _____

Total Federal Income Tax (Form 1040) \$ _____

Total Income of Father [or student if independent] (from W-2) \$ _____

Total Income of Mother [or student if independent] (from W-2) \$ _____

Yearly Untaxed Income and Benefits (Social Security, AFDC, Child Support, Other) \$ _____

Medical and Dental Expenses Not Paid by Insurance (not premiums) \$ _____

Total Cash, Checking, Savings, and Cash Value of Stocks (do not include retirement plan funds) \$ _____

Total number of family members living in the household and primarily supported by the above income # _____

Total number of family members attending college at least half-time during the next school year, including the applicant # _____

Parents' [or student's] current marital status: Married Single Separated Widowed

FINANCIAL AID AWARDS / SCHOLARSHIPS

List any confirmed financial aid awards and/or scholarships, including the source of the funds and amount.

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

ATTACHMENTS

The student is responsible for submitting all materials on time. This application for a scholarship becomes complete and valid only when the Community Foundation has received all of the following materials:

1. A brief essay (one or two pages) typed or printed/written legibly, describing your future aspirations, including your career goals, and how going to college or pursuing other professional education will help you achieve them.
2. Your completed application.
3. Transcripts of college courses already completed; OR high school transcript if you are a senior in high school.
4. Evidence of current employment at The Jerome Home.

Completed application and required attachments must be received at the following address no later than March 31.

Community Foundation of Greater New Britain
Virginia and William Bray Scholarship
74A Vine Street
New Britain, CT 06052

Applications may also be hand delivered to the above address by March 31 (4:00 p.m.). Applications will not be accepted after that date.

You may direct any questions to Cheryl Farmer, at 860-229-6018, Ext. 305.

I certify that I meet the basic eligibility requirements of the program as described, and that the information provided is complete and accurate to the best of my knowledge.

Applicant's Signature _____ Date _____

Parent or Guardian's Signature _____ Date _____
(if applicant is under age 18)