



San Benito County Chamber of Commerce & Visitors' Center
Scholarship Application

Student information

Student ID #: _____

Graduation Year: _____

Current High School: _____

Home address: _____

City, State, Zip: _____

Home & Cell Phone: _____

Birthdate: MM/DD/YY _____

Place of Birth: _____

Are you currently working: YES NO

If Yes, how many hours: _____

If employed, is anyone dependent on your income: YES NO

Do you plan on working while in college: YES NO

If yes, how many hours? _____

Parent information

Name of Parent(s) or Guardian(s): _____

Parent(s) or Guardian(s) occupation: _____

List all family members in your household: _____

Annual family income (*Circle one*):

0-15,999	16,000-26,999	27,000-37,999	38,000-48,999
49,000-59,999	60,000-69,999	70,000-79,999	80,000+

Have you applied for FAFSA? YES NO

If No, why not? _____

Please list any other financial support you may receive: (scholarships, grants, savings, gifts)

List all colleges/trade programs that you have applied to (*Name, City, State, Annual Cost*)

List colleges that you have been accepted to:

What is your planned major:

What are your career objectives:

Are you a first generation college student: YES NO

Student signature & Date: _____

Parent signature & Date: _____