



NEW HAVEN SCHOLARSHIP FUND

STUDENT/COUNSELOR CHECKLIST

THIS CHECKLIST SHOULD BE ON TOP OF EACH STUDENT'S APPLICATION

STUDENT _____ HIGH SCHOOL _____

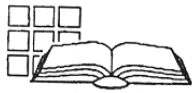
FOR INITIAL APPLICATION SUBMISSION:

- () APPLICATION FORM IS COMPLETE – ALL QUESTIONS ARE ANSWERED
- () ESSAY - WHY DO YOU WANT TO FURTHER YOUR EDUCATION? WHAT ARE YOUR GOALS/ASPIRATIONS? INCLUDE COMMUNITY SERVICE EXPERIENCE OR OTHER EXPERIENCE THAT HAS AFFECTED YOUR GOALS.
- () INCOME VERIFICATION - A COPY OF 2018 INCOME TAX 1040 (just the first 2 pages), 1040A, OR 1040EZ OR OTHER INCOME VERIFICATION DOCUMENT e.g. disability payments, SSI, etc. NOT W-2 FORMS
- () COPY OF STUDENT AID REPORT (SAR) FROM THE FAFSA
- () COPY OF HIGH SCHOOL TRANSCRIPT INCLUDING SENIOR GRADES AND ATTENDANCE RECORD
- () COPY OF SAT/ACT SCORES, IF NOT ON TRANSCRIPT

COUNSELOR SIGNATURE: _____ DATE _____

COMPLETED APPLICATIONS TO COUNSELOR OR SCHOOL GUIDANCE OFFICE BY OR BEFORE
WEDNESDAY, MARCH 4

NOTE: Incomplete applications will not be considered



NEW HAVEN SCHOLARSHIP FUND

Established 1959
www.NewHavenScholarshipFund.org

APPLICATION 2020

TO BE FILLED IN BY STUDENT AND PARENT(S)/GUARDIAN (PRINT CLEARLY)

FIRST _____ LAST _____ HIGH SCHOOL _____

STREET ADDRESS _____ ZIP CODE _____

HOME PHONE _____ CELL PHONE _____

EMAIL _____ DATE OF BIRTH _____ M/F _____

HIGH SCHOOL COUNSELOR NAME _____

COUNSELOR PHONE _____

MOTHER/GUARDIAN _____ EMPLOYER _____

FATHER/GUARDIAN _____ EMPLOYER _____

PARENT/GUARDIAN PHONE _____ NUMBER OF DEPENDENTS (LINE 6C OF 1040) _____

PARENT EMAIL _____

YOUR SAT SCORES CR _____ M _____ YOUR ACT SCORE _____ NOT APPLICABLE ()

YOUR INTENDED MAJOR _____

COLLEGES/SCHOOLS TO WHICH YOU HAVE APPLIED	COST (TUITION + FEE)	IF LIVING ON CAMPUS (ROOM & BOARD)	ACCEPTED(Y/N) NOT HEARD (P)
1. _____	\$ _____	\$ _____	_____
2. _____	\$ _____	\$ _____	_____
3. _____	\$ _____	\$ _____	_____
4. _____	\$ _____	\$ _____	_____
5. _____	\$ _____	\$ _____	_____
6. _____	\$ _____	\$ _____	_____
7. _____	\$ _____	\$ _____	_____
8. _____	\$ _____	\$ _____	_____

FAMILY INCOME**COMBINED FAMILY INCOME FOR 2018:**

() LESS THAN \$15,000 () LESS THAN \$25,000 () LESS THAN \$35,000

() LESS THAN \$45,000 () LESS THAN \$55,000 () LESS THAN \$72,000

TOTAL INCOME \$ _____

STUDENT SIGNATURE _____

PARENT SIGNATURE _____

ATTACH THE FOLLOWING:

1. YOUR PARENT(S)' 2018 1040 FORM (PAGES 1&2) OR OTHER INCOME VERIFICATION DOCUMENTS
(E.G. DISABILITY PAYMENTS, SSI, DSS ETC.) . ⇨ NOT W-2 FORMS

2. ESSAY - A SHORT ESSAY TELLING US ABOUT YOUR GOALS, ASPIRATIONS, COMMUNITY SERVICE, ETC. WHY DO YOU WANT TO FURTHER YOUR EDUCATION?

3. COPY OF YOUR STUDENT AID REPORT (SAR) FROM THE FAFSA, (IF FAFSA ELIGIBLE).
GO TO THE FAFSA LOG IN AND CLICK ON "View or Print your Student Aid Report (SAR)"

4. COPY OF SAT/ACT SCORES

👉 IMPORTANT!!! AN APPLICATION WILL NOT BE CONSIDERED, IF IT IS INCOMPLETE

RETURN YOUR COMPLETE APPLICATION TO YOUR
SCHOOL COUNSELOR OR GUIDANCE OFFICE BY OR BEFORE
WEDNESDAY, MARCH 4, 2020