James R. Goheen Memorial Scholarship

Personal Data			
Name			
(Last)	(First)	(Midd	le)
Address			
(Street)	(City)	(State)	(Zip)
Phone	Date of Birt	h	
Social Security	Male	Female	
Parents' Name	· · · · · · · · · · · · · · · · · · ·		
Parents' Address (if diff	Gerent from yours)		
Marital Status Single	eMarried		
Academic Data			-
Name of High School _		Year of Gra	aduation
Cumulative Grade Point	t Average	Class Rank #	out of
Name of College you pl	an to attend		
Reason for selecting this	s college		
Intended field of study_	Annual and the state of the sta		
What do you hope to do	with your education	1?	
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School and Community Involvement

List any organizations in which you have been a member or jobs in which you have been employed. Organizations may include academic, athletic, religious or social groups. Jobs may also include volunteer work or internships.

Activity	# of years	Positions or Offices Held
List any awards, hon-	ors or recognition receiv	ed:
Which of the above or honor received) h	experiences (participation ad been most important	on in a particular activity, leadership position to you?

Recommendation Form
Applicant's Name
Social Security #
To be eligible for a James R. Goheen Scholarship, an applicant must submit a Recommendation from a teacher, counselor, or employer. Please complete this form to assist our review of this applicant. Describe below your appraisal of applicant's strengths and weaknesses. Then indicate your overall rating.
would rate this applicant's overall personal qualities as:
extraordinary good moderate poor
(Signature and Title)
(Printed Name and Date)

Financial Data (Please attach a copy of your Student Aid Report.)

Total # of family members in household (including	g self):
# of family members in college during 2006-2007	(including self):
Father's employer:	Job title:
Mother's employer:	Job title:
Anticipated College Expenses: Contribution:	Estimated Family
Tuition and fees \$	Parents' contribution (from income and
assets) \$	
Room and board \$	Student contribution (from job and/or
savings) \$	
Books and supplies \$ please specify.)	Other (e.g. relatives,
Other (Please list.) \$	
<u> </u>	
Total college expenses: \$contribution \$	Total family
Have you applied for other other forms of financ	ial aid at this time?yes
Have you received other forms of financial aid at no If yes, please indicate the type, amount and source	

Source(s):

Scholarships	<u> </u>
	\$
	\$
Work study	\$
Other :	\$
(Please forward	d a copy of any current or future financial aid received from
any source.)	a copy of many comments of an incomment of the comments of the
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Do you plan to work	during the school year?
IC there are analysis for	nancial aircumetances which will affect your education of
	nancial circumstances which will affect your education, pl
describe.	
	and the state of t
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	nformation automatically disqualifies me
from eligibility.	mormation automatically disquarities life
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