

**SPACKENKILL PTA  
DOLLARS FOR SENIORS  
STUDENT RECOGNITION AWARD APPLICATION  
2019**

Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

**INSTRUCTIONS FOR FILING APPLICATION**

- All applications must be completed by the student and submitted to Geri Vasely in the High School Main Office on or before April 24, 2019.
- Type or print NEATLY using black or blue ink.
- Use another sheet of paper if additional writing space is required.
- Applications must be filled out completely. **Applications in which information is missing or incomplete will not be considered for a recognition award.**
- **The application must be signed by both the applicant AND his/her parent or guardian.**
- If you have any questions regarding this application, please contact Chairperson Kerry Maslyn at 845-242-6123.

Father's name or male guardian: \_\_\_\_\_

Occupation and employer: \_\_\_\_\_

Mother's name or female guardian: \_\_\_\_\_

Occupation and employer: \_\_\_\_\_

If parents/guardians are unemployed, length of time unemployed: \_\_\_\_\_

If parents/guardians not currently employed, is there a source of income? (explain briefly):

\_\_\_\_\_  
\_\_\_\_\_

List names and ages of all siblings and schools or colleges they are attending: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List two teachers with whom we can discuss your qualifications and verify your participation in school activities: \_\_\_\_\_

Name, occupation and telephone number of two references (other than teachers or relatives): \_\_\_\_\_

Briefly describe your educational and career goals: \_\_\_\_\_

In what activities have you actively participated? List the dates and number of hours per week/month you were involved in each activity. (If you have a copy of a résumé you used with your college application, you may attach it in lieu of answering questions a-e below).

a. List any academic honors received over the past three years:

---

---

---

b. List any athletic honors received over the past three years:

---

---

---

c. School-related activities (sports, clubs, etc.):

---

---

---

d. Community-related activities (volunteer work, religious activities, etc.):

---

---

---

e. Work experience (paper route, babysitting, employment, etc.):

---

---

---

Indicate any circumstance in your family that would affect your financial situation at this time (i.e. divorce, single parent household, illness, etc.):

---

---

---

---

---

---

List colleges or schools (with estimated annual cost) to which you have applied in order of preference.  
 Check if accepted.

	First Preference	Second Preference	Third Preference
Name of Institution			
Tuition			
Room & Board (if applicable)			
Commuting Costs			
TOTALS:			

The information presented on this application is true and accurate at the time it was completed.

\_\_\_\_\_  
 Student Signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Parent/Guardian Signature

\_\_\_\_\_  
 Date

Specify below how you plan to finance your first year at the schools listed on page 4. The totals listed here should equal the total cost listed for each preference. Either complete the chart below or attach a copy of your FAFSA Student Aid Report. (Please do not submit your entire FAFSA application.) You may also submit a copy of the financial aid package awarded to you by the college you may be attending. **This section must be completed in full in order for your application to be considered for an award.**

	First Preference	Second Preference	Third Preference
Source of Family Contributions			
Savings:	\$ _____	\$ _____	\$ _____
Loan:	\$ _____	\$ _____	\$ _____
Student Contributions			
Savings:	\$ _____	\$ _____	\$ _____
Summer Employment:	\$ _____	\$ _____	\$ _____
State and/or Federal Awards & Grants:	\$ _____ \$ _____ \$ _____	\$ _____ \$ _____ \$ _____	\$ _____ \$ _____ \$ _____
TAP Award:	\$ _____	\$ _____	\$ _____
Perkins:	\$ _____	\$ _____	\$ _____
Stafford:	\$ _____	\$ _____	\$ _____
Pell:	\$ _____	\$ _____	\$ _____
Other:	\$ _____	\$ _____	\$ _____
COLLEGE FINANCIAL AID PACKAGE			
College Grant and/or Scholarship:	\$ _____ \$ _____	\$ _____ \$ _____	\$ _____ \$ _____
College Loan:	\$ _____	\$ _____	\$ _____
Work/Study Grant:	\$ _____	\$ _____	\$ _____
Scholarships/Awards (other than grants by school) Please list: _____	\$ _____ \$ _____ \$ _____ \$ _____	\$ _____ \$ _____ \$ _____ \$ _____	\$ _____ \$ _____ \$ _____ \$ _____
TOTALS:	\$ _____	\$ _____	\$ _____