

**CASE # _____ Senator Addie C. Eckardt's Scholarship Application
District 37**

APPLICATIONS MUST BE POSTMARKED **MARCH 1, 2015** AND MAILED TO OUR ANNAPOLIS OFFICE. LATE APPLICATIONS WILL NOT BE ACCEPTED – NO EXCEP

TIONS! **LEAVE NO LINES BLANK!** IF YOU DO NOT POSSESS THE INFORMATION REQUIRED, PLEASE PROVIDE A BRIEF EXPLANATION IN THE BLANK. **INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.**

Name: _____ Telephone: _____

Address: _____ (not PO Box) City _____

ZIP Code _____ County _____

Email _____ (print)

Birth Date _____ Social Security Number _ _ _ - _ - _ _ _ _

Please note: You must be a resident of **District 37** to be considered for an award from my office. You may visit www.maryland.gov (Legislator, Who represents me?) to verify your legislative district.

High school: _____ Graduation Year: _____
High School G.P.A. _____

College: _____ Are you in a Graduate Program? YES NO
(Please note: **If plans are to attend an out of state college, attach verification from the Office of Student Financial Assistance with the Maryland Higher Education Commission that your major is approved as an "unique" major.**)

Major: _____ College GPA _____
Minor: _____

If you are not already enrolled, which college, university, or approved trade school do you plan to attend? (You must list at least one)

Have you been accepted? YES / NO Do you live with your parents: YES / NO

How many children are dependent on your parents? ____

Name of Father/Guardian and Occupation:

Name of Mother/Guardian and Occupation:

OR, If Married, Spouse and Occupation:

How many children are dependent on you? _____

2014 GROSS FAMILY INCOME: _____

How much will your family contribute toward your college expenses? _____

List all financial aid applied for and/or currently receiving (Amount? Confirmed Award? School Aid?) **HAVE YOU RECEIVED A SENATORIAL SCHOLARSHIP PREVIOUSLY? IF SO, AMOUNT AND LENGTH OF TIME FOR AWARD?**

Work History (include occupation, employer, specify full or part-time, length of employment, reason for leaving):

Your gross income for 2014: _____ Amount saved for college: _____

If you did not save money for college, please explain why _____

Hobbies, Community Service, Interests, Activities, Awards, Membership in Professional Associations, Extra-Curricular Activities:

Any special family circumstances to consider? (divorce, medical conditions or expenses, disabilities, other?)

Signature: _____ Date: _____

REMEMBER TO

MAIL BY MARCH 1st To:

**Senator Addie C. Eckardt
322 James Senate Office Building
11 Bladen Street
Annapolis, MD 21401**