

2012 Application Form
 Bobette Bibo Gugliotta Memorial Scholarship for Creative Writing
 Please read application instructions.

Applicant Contact Information

Name: _____
FIRST MIDDLE LAST

Permanent Address: _____
STREET

CITY STATE ZIP CODE

County of Residence: _____ Phone Number: _____

Cell Phone Number: _____ Email: _____

Date of Birth: ____/____/____ Gender: M F US Citizen? Yes No If no, are you a legal resident? Yes No

Optional Information

Did either of your parents complete college? Yes No

Race/Ethnic Origin: African-American Pacific Islander Latino Alaskan Native
 Asian-American Caucasian Native American Other

Academic & Extracurricular Information

High School: _____ HS Diploma Yes No Graduation date: ____/____/____
CITY GED/equivalent (or GED/equivalent)

Cumulative high school GPA (4.0 scale) : _____ Class rank: _____ Class size: _____
(if available)

College currently attending (If applicable): _____
NAME OF SCHOOL CITY / STATE

Class year you will be in college fall 2011 (check one): First Second Third Fourth

College you hope to attend in the fall:

1) _____ Yes No
FIRST CHOICE NAME CITY / STATE HAVE YOU BEEN ACCEPTED?

2) _____ Yes No
SECOND CHOICE NAME CITY / STATE HAVE YOU BEEN ACCEPTED?

List any school or community activities, recent employment history and awards/honors received. Attach an additional sheet if necessary.
 Additional sheets must follow application format.

Activity, Employment, Awards/Honors	Position Held and/or Significance	Dates and/or hours per week

Applicant Name: _____
FIRST MIDDLE LAST

Household/ Financial Information

It is strongly recommended that you fill out this section with a parent(s)/guardian(s) if you are a dependent. Round all figures to the nearest dollar; do not enter cent amounts. Use the most recent income tax information or estimated current year values. **Do not leave any lines blank.**

Name of parent(s)/guardian(s) with whom you reside (If you are a dependent): _____

- \$ _____ Cost of attendance (including tuition, fees, room & board, transportation, etc.) at college of choice (If you do not yet know the college you will be attending, please estimate)
- \$ _____ Head(s) of household's total gross income
- \$ _____ Head(s) of household's total cash assets (cash, checking/savings account, stocks, home equity)
- \$ _____ Student's income (if not head of household)
- \$ _____ Student's total cash assets (if not head of household)
- _____ Number in household your parent(s)/guardian(s) currently supports financially (including applicant)
- \$ _____ Number in household in a college degree/certificate program in 2012-2013 (including applicant)
- \$ _____ Grants/scholarships already received. Please list below as well.

Please list any grants or scholarships already received for upcoming academic year:

FUNDING SOURCE	AMOUNT
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Please describe any special circumstance that may affect your family's ability to pay for college (medical, divorce, unemployment, child support, other):

Required Signatures

I hereby authorize release of any information shown on this application, personal essay, transcripts and references. I certify that all of the information I have provided in this application is accurate and is subject to verification by Silicon Valley Community Foundation at its discretion.

Student: _____ Date: ____/____/____

Parent or Guardian: _____ Date: ____/____/____
(if applicable)

Notification will be mailed by May 2012 to the address provided. Should you be awarded, scholarship payments will be sent directly to college financial aid offices after Silicon Valley Community Foundation receives verification of admission and enrollment. The community foundation does not disburse scholarship payments directly to individual students.