



## Edge Forward Scholarship Application

The purpose of this scholarship is to recognize and encourage scholastic achievement within the low-income community. Preference will be given to those who are seeking a STEM/STEAM degree and display exceptional character and productive citizenship.

**Date:**

**Name:**

**Permanent Address:**

**City:**

**State:**

**Zip:**

**Phone:**

**Email:**

**Age:**

**Date of birth:**

**Gender:**

**Pronouns (optional):**

**Ethnicity:**

**Are you a US citizen? YES NO**

**Personal conditions:**

- First in family to attend college**
- Parents unemployed**
- Emancipated**

### **School Information**

**Do you attend school currently? YES NO**

**Name of School:**

**School Address:**

**School Phone number:**

**Counselor's Name:**

**Counselor's email:**

**Current grade level:                                  Average GPA (attach a copy of transcript):**

**ACT/SAT score (a copy of your score is required):**

**List any academic honors, awards and membership activities while in high school:**

**Have you already enrolled in/ been accepted to a university/community college? If yes, please provide start date:**

**Name of university/college (Please attach proof of acceptance):**

**Desired major:**

**Have you received any other scholarships? If yes, please list below.**

### **Financial Information**

To be eligible for an Edge Forward scholarship, you must fall within the low-income guidelines within your region. If unemployed, please write NA.

### **Applicant Employment**

**Employer:**

**Position:**

**Time at current job:**

**Monthly income:**

**\* Please attach your last six pay stubs with your application. If you do not have paystubs, please include your most recent federal tax return.**

### **Parent or Guardian Employment**

**Employer:**

**Position:**

**Time at current job:**

**Monthly income:**

\* Please attach last six pay stubs with your application. If you do not have paystubs, please include your most recent federal tax return.

**Household monthly income:**

**Total number of family members in your household:**

**Please fill in spaces below for ALL household members (list yourself first):**

Name	Age	Relation to applicant	Monthly income
1.		Applicant	
2.			
3.			
4.			
5.			
6.			

\*If there are more people living in your household, please list them on a separate sheet.

**Other financial assistance you will receive per semester/quarter:**

Type	Amount	Comments
Personal	\$	
Other scholarships	\$	Describe below under other comments
Student loan(s)	\$	Describe below under other comments
Other financial resources	\$	Describe below under other comments

**OTHER COMMENTS:**

## **Short Essay\***

How will this scholarship make a difference for you?

What are your academic (or professional) goals?

Why do you deserve this scholarship?

Signature:

## **CHECKLIST OF ATTACHMENTS**

- Proof of ACT/SAT score
- Current GPA transcript
- Paystubs or Tax return (personal if applicable and/or guardian)
- Proof of acceptance to university/college

**\*You may include short answers on a separate sheet of paper.**