

B.A.S.E. SCHOLARSHIP APPLICATION

Bellingham Association of School Employees

The members of the Bellingham Assoc. of School Employees are offering a scholarship to a Bellingham School District senior planning on pursuing post-high school education the year after graduation. More than one scholarship may be awarded as funds are available.

To be eligible to apply you must meet the following criteria:

- Currently attending a Bellingham School District high school
- 2.5 GPA or better
- Have been accepted, or is in the process of applying to a community college, vocational school, or college/university
- **The applicant must demonstrate financial need**

Please also note:

- **All portions of this application must be complete to be considered**
- **Scholarship deadline is Wednesday, April 21st, 2021**

APPLICANT DATA

Name (Last) (First) (Middle initial) Date of Birth

Permanent Mailing Address (Street) (City) (State) (Zip)

Name of parent/guardian: _____

Permanent mailing address of parent/
guardian if different from applicant: _____
(Street) (City) (State) (Zip)

Student Cell Phone # _____ Student email _____

SCHOOL DATA

Current High School _____ Graduation Date (mo., yr.): _____

GPA: _____

Name of post-secondary school for which applicant's scholarship is requested: _____
 4-yr. College/University
 Community/Technical College
 Other

Address: _____
(Street) (City) (State) (Zip)

Major field of study applicant plans to pursue: _____

CERTIFICATION AND SIGNATURES

In submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge. Falsification of information may result in termination of any scholarship granted.

Applicant's Signature _____ **Date** _____

Are you the son, daughter, or grandchild of a current BASE employee? Yes, Name _____

Occupation _____ Location _____

In 200 words or less please tell us your plans as they relate to your educational and career objectives and future goals.

In 200 words or less please describe any unusual family or personal circumstances that have affected your achievement in school, work experience, or your participation in school and community activities. Include dates/times.

Financial Information- must be completed to be considered

Did You complete the FAFSA? Yes _____ No _____

If Yes, what is your EFC (Expected family contribution) from your FAFSA \$ _____

Household family income: _____ Under \$35,000 _____ \$36,000-\$50,000 _____ \$51,000- \$70,000 _____ \$71,000 +

Were you considered an Independent Minor for the FAFSA? Yes _____ No _____

Do you have any dependants? Yes _____ If yes, how many? _____ No _____

Total Number of family members living in your household

Parents' current marital status is: single married separated divorced widowed

Total number of family members planning to attend a post-secondary school at least half time during the next school year, including applicant: _____

Are there other financial burdens affecting ability to provide for educational support:

Please list below the name and amount of any grants or scholarships that you have been awarded (or expect to receive) for the coming school year: (example: College Bound Scholarship, merit aid, Whatcom Dollars for Scholars)

Name of the Award	Amount	Granted or Pending

For Career Center Staff Only to complete:

BASE Employee Child _____ Grandchild _____ GPA _____ Staff Initials _____

APPLICATION CHECKLIST

Your application becomes complete and valid only when you have **INCLUDED THE FOLLOWING MATERIALS:**

- Completed Application
- All required signatures and initials

Return completed application to by: Wednesday, April 21, 2021

email to
Martha.Zender@bellingshamschools.org