

**Los Molinos High School  
Common Scholarship Application**

Name of Student: \_\_\_\_\_ Age: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Total GPA: \_\_\_\_\_ Class Rank: \_\_\_\_\_ Class Size: \_\_\_\_\_

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Name of Parents: \_\_\_\_\_

Father's Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

Mother's Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

Number and age of siblings: \_\_\_\_\_

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Institution you plan to attend: \_\_\_\_\_

*(First choice school- name, city and state located)*

Intended Major/Career Goal: \_\_\_\_\_

What degree or certificate do you plan to obtain: \_\_\_\_\_

*(Vocational Certificate, AA, BA, BS)*

Estimated annual college/educational costs: \$ \_\_\_\_\_

*(Total annual tuition, books, room & board, transportation)*

Will you apply for financial aid from the federal and state government student aid programs? \_\_\_\_\_  
(FAFSA/Dream Act)

Do you have family members currently attending college? \_\_\_\_\_ If so, who and where?

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Have you been employed while attending high school? \_\_\_\_\_

*(If so please state where you worked and what job duties you performed)*

Approximately what can your parents contribute towards your monthly college support?

\$ \_\_\_\_\_

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