#### Mahki Bostic's Dream Chasers Foundation, Inc Scholarship Application 7650 NE 183<sup>rd</sup> Ct Williston, Florida 32696 352-363-1824

First Name	M	liddle	Last Name	
Personal Information		*		
Address				
City	State	Zip	County	
Date of Birth		Place of Birth (city)	State	
Social Security Number		Email Address		
Educational Information				
High School Currently Attending		Jr College or other curre	ently attending	
Street Address		Street Address		
City/State Zip		City/State	Zip	
Phone Number		Phone Number		
Grade Point Average		Grade Point Average	-2-10-1-0-1-0-1-0-1	
SAT Score (math)+	(verbal)	=		
ACT Score				

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# **Parental Information** Parent/Guardian 1 Parent Guardian 2 Name Name Job Title Job Title Place of Employment Place of Employment Address of Employer Address of Employer City, State, Zip City, State, Zip Telephone Telephone Preliminary Financial Statement: Do you live with: \_\_\_\_\_both parent's \_\_\_\_\_ one parent\_\_\_\_\_? \_\_\_\_\_Independent Other Number of family members living in your household \_\_\_\_\_ Have you ever been arrested for or convicted of any Law Violation which would constitute a felony? \_\_\_\_\_\_\_\_no

Previous year's total incomes: Parents \_\_\_\_\_ Student

If yes, state the court, nature of offense, case disposition and date

List any other expected scholarship and financial aid sources

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## This section to be completed by counselor:

1. Students cumula	ative High Sch	ool Grade Point	Average		LA.
2. College entrance	e examination	scores (ACT or	SAT)		
3. Please list studer also attached transc		r the term indicat	ted. (Note any	Honors or Dual	Enrollment)-Can
Sophomore yr.	Grade	Junior yr.	Grade	Senior yr.	Grade
					****
To be Completed	by Applicant	<u>.</u>			
Extracurricular Act	tivities Org	anizations or Cl	ubs		
Honors or Awards:					
¥-17/1-1			-,		
Community or other	or activities:				
Community of our	er activities,				

### Mahki Bostic's Dream Chasers Scholarship Application

Work Activities:			
Are you employed?	yes or	no	
If yes, what type or work a	and how many hou	rs per week?	
( <del></del>			
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why you want to be a recip	pient of this schola	, please describe in a short e rship, the course of study you r abilities you have that were	ou plan to follow, your

Please submit all applications to the Guidance Counselor by April 15

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(g) 10 20 100