

# COLUMBIA HIGH SCHOOL SCHOLARSHIP FUND

P.O. Box 315, Maplewood, New Jersey 07040

www.chssf.org

## CONFIDENTIAL APPLICATION FOR CHS GRADUATES

READ CAREFULLY AND PRINT CLEARLY

G1. \_\_\_\_\_  
Applicant's last name                      First name                      Middle name                      M      F                      Non-Binary/Third Gender

G2. \_\_\_\_\_  
Home address                      Street                      Apt. #                      City                      State                      Zip Code

G3. \_\_\_\_\_  
Telephone: (Home #)                      (Cell #)                      Last (4) digits Soc. Sec. No.

G4. \_\_\_\_\_  
Year of High School Graduation                      E-Mail Address                      College ID# (If applicable)

G5. \_\_\_\_\_  
Special Scholarships for which you may be eligible (See Instruction Sheet)

A1. College/School now attending \_\_\_\_\_  
Name                      Address

Present year in college/school:    Freshman     Sophomore     Junior     Senior     Graduate School

A2. College/School which you will be attending (if different) \_\_\_\_\_  
Name                      Address

PLEASE INCLUDE AN UNOFFICIAL COPY OF YOUR TRANSCRIPT SHOWING YOUR FALL SEMESTER GRADES

A3. Applicant lives with:    Parents     Mother     Father     Spouse     School Housing     Other \_\_\_\_\_

A4. Is applicant married?    No     Yes     Dependents?    No     Yes     How many? \_\_\_\_\_

A5. Applicant is:    In School     Working     Other (Please explain): \_\_\_\_\_

A6. What field of study are you pursuing? \_\_\_\_\_

A7. Are you receiving financial aid?    Yes     No     (Check any that apply):     FAFSA     Scholarship/Grant     Loan     Work Study  
 Educational Opportunity Fund (EOF)     Other \_\_\_\_\_

A8. EDUCATIONAL EXPENSES		2024-2025 Actual	2025-2026 Estimated	A9. FINANCIAL RESOURCES		2024-2025 Actual	2025-2026 Estimated
Tuition and fees	\$		\$	Grants, scholarships, fellowships, work study, and any other sources of financial aid. (List)	\$		\$
Room	\$		\$	Loans (bank, student, state, credit card, other)	\$		\$
Board	\$		\$	Contribution from applicant's parents/guardian	\$		\$
Books and Supplies	\$		\$	Contribution from others	\$		\$
Transportation: (two round trip railroad, bus, air coach fares if applicant is a resident student, or commuting expenses if applicant is a commuter.)				Applicant's wages, tips, savings, etc.	\$		\$
				Applicant's interest and investments	\$		\$
				Social Security benefits	\$		\$
			Veterans benefits	\$		\$	
<b>TOTAL EDUCATIONAL EXPENSES</b>	<b>\$</b>		<b>\$</b>	<b>TOTAL FINANCIAL RESOURCES</b>	<b>\$</b>		<b>\$</b>

PARENT(S) / GUARDIAN(S) / SPOUSE (If Applicable) INFORMATION

		PARENT	PARENT	GUARDIAN	SPOUSE
P1.	Name				
P2.	Address (if other than applicant's)				
P3.	Age				
P4.	Current Marital Status				
P5.	Occupation				
	Number of years employed at same				
	Annual salary before taxes				
	this year estimated				
	last year actual				
	Other income (gifts, social security, child support, etc.)				
P6.	<b>Assets / Expenses</b>				
	Home (If Owned)				
	year purchased				
	purchase price				
	present assessed value				
	what is owed on mortgage				
	annual mortgage payments (including taxes)				
	If you do not own a home, indicate annual residence rental fees				
	Value of other real estate (Rental property, summer home, timeshare, etc.)				
	Cash, Savings, Checking accounts, etc.				
	Other investments (stocks, bonds, CD's, 529 plans). <b>DO NOT INCLUDE IRA's, 401k, 403(b) etc.</b>				
	Car(s) - year and make				

**P7. EXPLANATION OF SPECIAL CIRCUMSTANCES**

Please explain special family circumstances, unusual expenses, illness, debts, dependencies, retirement provisions, etc., that would allow a fair evaluation of your financial need.

**WITH THIS APPLICATION  
PLEASE SUBMIT A COPY OF 2024 FILED INCOME TAX RETURN OF APPLICANT AND PARENT(S) /  
GUARDIAN(S) / SPOUSE (If Applicable). You may redact/black out SSNs.  
DO NOT SUBMIT W-2 FORMS**

A10. I agree to report to the Columbia High School Scholarship Fund (P.O. Box 315, Maplewood, NJ 07040 or chssf@chssf.org) any scholarship grants and/or loans received after this application has been submitted. Failure to do so may jeopardize award.

Date \_\_\_\_\_  
Month Day Year

\_\_\_\_\_  
Signature of Applicant

**APPLICANT EMPLOYMENT/VOLUNTEER/CLUBS/SPORTS INFORMATION**

A11. Please give a brief statement of your employment/volunteer/clubs/sports activities during the school year. Include wages earned.

A12. Please give a brief statement of your activities last summer including wages earned, and what is planned for this summer including estimate of wages. **INCLUDE ANY VOLUNTEER INFORMATION.**

### APPLICANT'S DECLARATION

The information contained in this application is true to the best of our knowledge. We authorize its use by the Columbia High School Scholarship Fund.

Date \_\_\_\_\_  
Month Day Year

\_\_\_\_\_  
Signature of Parent / Guardian / Spouse

Date \_\_\_\_\_  
Month Day Year

\_\_\_\_\_  
Signature of Applicant

### ADDITIONAL COMMENTS

PLEASE READ CAREFULLY

Do not file your application unless every question is answered. If question does not apply, answer it by showing a dash (-). **INCOMPLETE APPLICATIONS WILL NOT BE REVIEWED FOR SCHOLARSHIP CONSIDERATION.**

#### CHECKLIST (Is your application complete?)

Please check (✓) each box:

- Are all questions answered?
- Did you include 2024 tax return(s)?
- Did you include fall transcript?
- Did you and your parent / guardian / spouse sign?