

JOHN E. MORGAN SCHOLARSHIP

STUDENT APPLICATION FORM

(please type or print legibly)

Name _____

Student's Street Address _____

Student's Social Security Number _____

City, State, Zip Code _____

Student's Phone Number _____

Student's Date of Birth _____

HIGH SCHOOL INFORMATION:

Name of High School Attended _____

Guidance Counselor _____

High School Street Address _____

Phone Number of High School _____

City, State, Zip Code _____

Actual or Expected Date of High School Graduation _____

Cumulative GPA Upon High School Graduation or Last Semester Completed _____

POST-SECONDARY INFORMATION:

Name of Institution in Which You Are Enrolled or Plan to Attend (college, technical school, trade school, business school or other) _____

Institution Street Address _____

Enrollment Status at Beginning of Upcoming Semester (If school is not a college or university, indicate expected status as an incoming student, 2nd year, 3rd year, 4th year etc. If school is a college or university, indicate expected status as a freshman, sophomore, junior, senior or year of graduate school) _____

City, State, Zip Code _____

Phone Number of Institution _____

Cumulative GPA at End of Last Semester Completed, if Applicable _____

JOHN E. MORGAN SCHOLARSHIP

Is this a first-time scholarship or a renewal?

What is your current or prospective major or area of study?

What are your career objectives?

Would you be studying full time (at least 12 credit hours)?

What is the tuition per semester at the institution where you will matriculate?

Are you applying for a scholarship for a particular semester or for a full school year?

What is the starting date of the first semester for which you are applying for a scholarship?

To the extent now known, what is the total amount of scholarship proceeds and other grants or financial aid (excluding loans) that you have received or expect to receive from other sources?

IF THIS IS A RENEWAL SCHOLARSHIP, YOU ARE NOT REQUIRED TO COMPLETE THE REMAINDER OF THE APPLICATION. PLEASE SIGN ON PAGE FOUR AND RETURN TO THE JOHN E. MORGAN FOUNDATION. FIRST TIME APPLICANTS MUST COMPLETE THE REMAINDER OF THE APPLICATION.

JOHN E. MORGAN SCHOLARSHIP

- Optional -

In one page or less, provide any information you think might be helpful in evaluating your application (include in your answer a brief statement of why you should be considered for a John E. Morgan Scholarship).

If given a choice, in what geographic location would you like to establish your career upon graduation (please state your reasons)?

List significant extracurricular and/or community activities and your role in each:

Please submit the most recent official transcript of your grades with this application.

Recommendations are not required. If, however, you wish to submit recommendations, please use the attached forms.

Please submit a copy of your most recent federal income tax return and your parents' or guardians' most recent federal income tax return.

The John E. Morgan Foundation may request additional financial information from you and your parents or guardians.

My signature below shall certify that I am not related by blood, adoption or marriage as a first cousin or nearer relative to any director or officer of the John E. Morgan Foundation or to any member of any Committee that participated in awarding John E. Morgan Scholarships.

Date

Student Signature and Printed Name

Please mail application to: John E. Morgan Foundation, Inc.
P.O. Box 349
Tamaqua, PA 18252

**ALL APPLICATIONS MUST BE RECEIVED BY THE JOHN E. MORGAN FOUNDATION
SIX (6) MONTHS PRIOR TO THE START OF THE SEMESTER FOR WHICH YOU ARE
APPLYING FOR A SCHOLARSHIP**