## APPLICATION DEADLINE: MAY 15th, 2023 (No Exceptions)

Name	(LAST)	(FIRST)	(MIDDLE)
•		-	d Traverse County for at leas
three out o	f four of your higl	h school years (grades	9-12), which includes your
senior year	or did you attend	l a school district in or	ne of the aforementioned
	nd resided in a cor		
		_	you are not eligible to apply)
1 65 (_	COUNTY		you are not engine to apply)
Dualifying		Mailing	
Address:		Address:	
Street		(if different)	
City	State	Zip Code	
( )	_	1 1	XXX - XX -
Telep	hone Number	Date of Birth	XXX - XX - Social Security Number (LAST 4)
<ul><li>Are you m</li><li>Do you ha</li></ul>	ve dependants wh	Yes / Spouses Name o live with you?No	Yes / How many?(If NO: Name & Relationship)
. Do you rec	nao man joan pan		(If NO: Name & Relationship)
			pation
• Father's N	ame:	Occup	ation
Daytime tele	phone contact # ()		ation
			oation
• List the fir	st name(s) and ag	e(s) of siblings at hom	ne:
•		me(s) and age(s) of all ge for the application a	family household members

	ial Goals:	-	
	THE PROPERTY OF THE PROPERTY O		
	ha distribution		-
Community so	ervice previous 5 vr	'S (e.g. church work, volunteer wor	k & other projects)
Community 30	civice previous 5 yi	5 (e.g. church work, volunteer wor	k & other projects)
Previous five	years' work experie	ence:	
WORKING PERIOD	EMPLOYER	Hall-Marker and the second sec	3 DESCRIPTION
<u> </u>			
11-11			
/ / - / /			
<u> </u>			
		,	
List three unre	elated adult reference	Ces (Teachers, Neighbors, Employ	ers, etc.):
	elated adult reference	Ces (Teachers, Neighbors, Employ  ADDRESS	ers, etc.):  TELEPHONE
ME	RELATIONSHIP		TELEPHONE
cademic Data	RELATIONSHIP  (see instr paragraph #7 & 7	#8) (ATTACH TRANSO	TELEPHONE CRIPTS)
Academic Data  Date of gradua	RELATIONSHIP  (see instr paragraph #7 & ation//	#8) (ATTACH TRANSO	TELEPHONE CRIPTS)
ACADEMIC Data  Date of gradua	RELATIONSHIP  (see instr paragraph #7 & ation//	#8) (ATTACH TRANSO	TELEPHONE CRIPTS)
cademic Data  Date of gradus  Secondary Ed	RELATIONSHIP  (see instr paragraph #7 & ation/	#8) (ATTACH TRANSO	TELEPHONE  CRIPTS)
cademic Data  Date of gradua  Secondary Ed	RELATIONSHIP  (see instr paragraph #7 & ation/ cucational Institution City	#8) (ATTACH TRANSO or GED completion/_ n(s) attended (HIGH SCHOOL):	TELEPHONE  CRIPTS)
AME  Academic Data  Date of gradua  Secondary Ed  ame:  HELPFUL: Include	(see instr paragraph #7 & ation/ cucational Institution City	#8) (ATTACH TRANSO  or GED completion/_  n(s) attended (HIGH SCHOOL):	toto graduation)
Date of graduate Secondary Edame:  HELPFUL: Include A	(see instr paragraph #7 & ation/ curational Institution City City City City CH Club member in	#8) (ATTACH TRANSO or GED completion/_ n(s) attended (HIGH SCHOOL):	TELEPHONE  CRIPTS)  to  to  to graduation)  at least two of

## 2023/2024 ACADEMIC YEAR JOHNSON FOUNDATION SCHOLARSHIP APPLICATION

		S & ACHIEVMENTS	DATES
	1100		
Other Achievements (Government, Clubs, Athl			e areas of Civic, St
Activity Description a		Awards/Recognitio	n/Honors/Offices Held
			444000000
Education Goals:			
4,4,4,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1			
Higher Educational In	nstitution(s) applied	I to (top three list	ed in preferential o
Higher Educational In	nstitution(s) applied	• -	
(NAME)	(ADDRESS)		(PENDING, ACCEPT) OR ENROLLED)
(NAME)	(ADDRESS)		(PENDING, ACCEPT OR ENROLLED) Status:
(NAME)	(ADDRESS)	MANANA NA	(PENDING, ACCEPT OR ENROLLED) Status: Status:
(NAME)	(ADDRESS)		(PENDING, ACCEPT OR ENROLLED) Status: Status: Status:
(NAME)  Major:	(ADDRESS)	reer Choice:	(PENDING, ACCEPT OR ENROLLED) Status: Status: Status:
Major:Status:Freshman	Intended Ca Sophomore Juni	reer Choice: orSenior	(PENDING, ACCEPT OR ENROLLED) Status: Status: Status: Graduate
(NAME)  Major:	Intended CaJuniv:Less than 12;	reer Choice: orSenior 12-15 ;1	(PENDING, ACCEPTION OR ENROLLED)  Status: Status: Status: Graduate  or more

	tudent Debt accumulated to date fo		
any cour	Educational Institution currentl ses taken: (attach a copy of you	r official transcripts	*
	4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		
•			
inancial <b>I</b>	<b>Data</b> (see instruction paragraph	n #6 & #13)	
TTACU.	ETNIANCTAL ATD AM	ANN LETTER (	ALAND ATODY) as
•	our FINANCIAL AID AW		
•	tmnt of costs, resources and l	•	
(4	A copy of your FASFA report	t would also be he	lpful)
Estimate	d expenses for attending <b>ONE</b>	L academic year at	your Institution:
	TUITION AND FEES	\$ .	
	BOOKS & SUPPLIES	\$	
	ROOM & BOARD	\$	
	OTHER:	\$	
	OTHER:	\$	
	OTTLER.		
	TOTAL COSTS	\$	
T :st oll o	www.nt Cabalanshina Cuanta	A records massived	and/an annliad fam
List aii c	urrent Scholarships, Grants & DESCRIPTION	Amount for year	
<u> </u>	DESCRIPTION	\$	A WARDED OF PENDING
	W	\$	
***************************************	***************************************	\$	
		\$	
		\$	
		\$	
**************************************		\$	
		Ψ	
	ch money have you saved for	college? \$	
How mu		•••••••	
How mu	currently working and or will	you be working du	ring your academic
		•	
Are you			
Are you	Yes No Explain:		
Are you			
Are you year?			
Are you year?Estimate	YesNo Explain:	 Loans \$ Wo:	rk study \$

## 2023/2024 ACADEMIC YEAR JOHNSON FOUNDATION SCHOLARSHIP APPLICATION

• Enter the Adjusted Gross Income from App (see instruction paragraph #6 & #13 ar	
yr 2022 \$ / yr 2021 \$	/ yr 2020 \$
AND AGI of Parents/Stepparent if claimed as a degree yr 20212 \$ / yr 2021 \$ AND	
AGI of non custodial parent, if parents are of yr 2022 \$ / yr 2021 \$	
• Statement of Financial need (Attach separate s	heet if more space is needed):
Use the space provided below for any additional relevant to the Board in considering you for this you deem important):	•
HELPFUL: Did anyone other than yourself, participate in the fil	ing out of this application?
Yes No <u>Signature</u> (By signing below, I agree that the informatic true and accurate).	on I have provided on this application is
	Applicant
Signature (REQUIRED)	Date