

**APPLICATION FORM**  
**NEW YORK STATE FEDERATION OF HOME BUREAUS, INC**

**Warren County Home Bureau #80:** Radiology Technician, Criminal Justice

**Date:** \_\_\_\_\_

**To be eligible to receive this award a student must be:**

- Full-time student (see guideline #1)
- Academic standard of 2.85
- Student must be in 2<sup>nd</sup>, 3<sup>rd</sup> or 4<sup>th</sup> year
- Resident of NYS within an organized county of Home Bureau

If an applicant feels any one or more questions are too personal, they do not have to put a response in.

1. Name \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_
  
2. Grade point average: \_\_\_\_\_  
Anticipated graduation date: \_\_\_\_\_  
Field of study: \_\_\_\_\_
  
3. Single or Married (circle one)      Age: \_\_\_\_\_  
A. Applicant occupation: \_\_\_\_\_  
B. Applicant spouse occupation: \_\_\_\_\_  
C. Total income: \_\_\_\_\_
  
4. Legal address and county on file with the college:  
County: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_
  
5. Father's occupation \_\_\_\_\_
  
6. Mother's occupation \_\_\_\_\_
  
7. Do you live off campus or at home \_\_\_\_\_
  
8. Estimate your total yearly educational costs \_\_\_\_\_
  
9. Number of brother or sisters in currently in college: \_\_\_\_\_
  
10. Number of brother or sisters currently living at home: \_\_\_\_\_
  
11. What other financial aid are you applying for?  
\_\_\_\_\_

12. List other financial assistance you will receive next year and the amounts of each:

\_\_\_\_\_

13. Give total educational indebtedness to date \_\_\_\_\_

14. List the last 3 (three) jobs you have held and where:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

15. List extra-curricular activities, on and off campus and giving type of participation

\_\_\_\_\_  
\_\_\_\_\_

16. List honors, awards, scholastic and otherwise received in secondary school or college

\_\_\_\_\_  
\_\_\_\_\_

17. List community activities \_\_\_\_\_

\_\_\_\_\_

18. In what way do you feel you have shown potential toward a successful career in the field you have chosen? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If additional space is needed for answers please answer on a separate sheet and attach

May we have permission to confirm your citizenship and financial eligibility?

Yes\_\_\_\_\_ No\_\_\_\_\_

Revised Jan 2014 gmt