## PULASKI COUNTY KOREAN ASSOCIATION SCHOLARSHIP PROGRAM APPLICATION

SECTION 1: (Information to be supplied by applicant)

## PLEASE TYPE OR PRINT

First Name	_Middle	Last		
Students Address				
		Zip Code		
		al Security # (Opt)		
Date of Birth	Sex	Place of Birth		
Full Name of Parent or Guardian				
Parent or Guardian Occupation				
Family's adjusted gross income from last year's tax return:				
Under \$15,000 _		\$25,00 to \$35,000		
\$35,000 to \$45,0	000	Over \$50,000		
Total number of family members living at home				
Number of dependents in your parent/guardians home, including yourself:				
ChildrenAges _		# attending college		
College or University you plan to attend				
Date you expect to enter: (Month and Year)				

EXTRACURRICULAR ACTIVITIES IN WHICH YOU HAVE ENGAGED (Include church,
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community or service organizations, school activities, etc.)
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HONORS AND AWARDS:
Are you employed? Yes () No ()
f yes, what type of work, and how many hours per week?

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	school officials to make available to the Pulaski nittee information concerning my transcript and
Signature of Applicant	Signature of Parent/Guardian
After you have completed your part of this app with your transcript, for certification and deli-	•

NOTE: PLEASE TYPE OR PRINT your application. If we cannot read the application answers, we will not consider your application.

APPLICATION DEADLINE TO GUIDANCE OFFICE: APRIL 16, 2021