

**APPLICATION FOR THE 2007-2008  
ALBERT SOGLIN/THOMAS J. MCBRIDE MEMORIAL SCHOLARSHIP  
(HAROLD WASHINGTON COLLEGE LOCAL 1600, UNION SCHOLARSHIP)**

PLEASE TYPE OR PRINT.

1. \_\_\_\_\_  
Last Name                                      First Name                                      M.I.                                      Student I.D. Number

2. \_\_\_\_\_  
Address    City    State    ZIP Code

3. \_\_\_\_\_  
Home Telephone Number                                      Cell Phone Number                                      Business Telephone Number

4. **E-mail address** \_\_\_\_\_

5. List the names of two Harold Washington College Faculty members from whom you will be requesting recommendations.

Name \_\_\_\_\_ Department \_\_\_\_\_

Name \_\_\_\_\_ Department \_\_\_\_\_

6. List any school and/or outside activities. (Attach additional sheet.)

7a. Date of Birth \_\_\_\_\_ (optional)                                      7b. Marital Status \_\_\_\_\_ (optional)

8. Number of Dependents \_\_\_\_\_

	<b>Actual (2007)</b>	<b>Estimated (2008)</b>
9. <b>Total Income</b>	\$ _____	\$ _____

10. Enter the amount of income earned through:

**A. Employment**

1. Student                                      \$ \_\_\_\_\_                                      \$ \_\_\_\_\_

2. Spouse                                      \$ \_\_\_\_\_                                      \$ \_\_\_\_\_

**B. Other Income**

(child support, tax-free bonds, capital gains, welfare, etc.)

\$ \_\_\_\_\_                                      \$ \_\_\_\_\_

**Student Resources for the 2007-2008 academic year**

- 11. Grants:
  - a) PELL Program \$ \_\_\_\_\_
  - b) Monetary Award Program (M.A.P.) \$ \_\_\_\_\_
  - c) S.E.O.G. \$ \_\_\_\_\_
  - d) Illinois Incentive for Access Program (I.I.A.P.) \$ \_\_\_\_\_
- 12. VA Educational Benefits for \_\_\_\_\_ months \$ \_\_\_\_\_
- 13. Financial assistance from student's parents \$ \_\_\_\_\_
- 14. Financial assistance from spouse's parents \$ \_\_\_\_\_
- 15. Other available resources. \$ \_\_\_\_\_  
Explain other resources: \_\_\_\_\_

**Answer the following prompts on separate sheets of paper, and staple them to the application:**

- 16. Explain any unusual circumstances or expenses.
- 17. Include a biographical paragraph about yourself and inform the **ALBERT SOGLIN/THOMAS J. MCBRIDE MEMORIAL SCHOLARSHIP COMMITTEE** why you think you deserve this scholarship.
- 18. Describe any extra-curricular activities that you think are relevant to your application.

**Certification**

I certify that to the best of my knowledge the information contained in this statement is correct and complete.

Signature of Student \_\_\_\_\_

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