

OWEN LOCKE MEMORIAL ENDOWED FOUNDATION

**SCHOLARSHIP APPLICATION
ADDITIONAL YEAR FUNDING**

Please complete the following for consideration for additional years funding. Your new application will be considered against all other current applications.

Applicant's Name: _____

Address: _____ City: _____ State: ___ Zip Code _____

Phone: (___) _____ Phone #2: (___) _____ Email: _____

Current Family Income: \$ _____

Other scholarship awards you are receiving: _____

Attach a copy of your FAFSA Electronic Aid Report (SAR).

Attach a typed essay explaining why further funding is necessary to your career goals. Please include:

1. How have you been helped?

- How were you inspired by your classes?
 - Are your goals the same as last year?
 - If goals have changed, please explain.
 - If goals are the same, what progress has been made?
 - In what way(s) have your financial /personal circumstances changed since your original application?
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2. Attach a copy of your official transcripts from last year's classes.