

**C.J. MACON SCHOLARSHIP FOUNDATION  
ALUMNI APPLICATION**

PERSONAL INFORMATION

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Married:     Y/N     Children:     Y/N

Address: \_\_\_\_\_

FAMILY INFORMATION

Father/Guardian's Name: \_\_\_\_\_ Same address as above?     Y/N

Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Mother/Guardian's Name: \_\_\_\_\_ Same address as above?     Y/N

Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

SIBLING INFORMATION

Please give the names and ages of all brothers/sisters living in your home:

\_\_\_\_\_

\_\_\_\_\_

FAMILY ANNUAL HOUSEHOLD INCOME:

\_\_\_\_\_ Less than \$25,000     \_\_\_\_\_ \$26,000-40,000     \_\_\_\_\_ \$41,000-60,000  
\_\_\_\_\_ \$61,000-80,000     \_\_\_\_\_ \$81,000-100,000     \_\_\_\_\_ over \$100,000

Do you have to support or assist your family:     Y/N

Are you currently working?     Y/N     Will you work while attending college?     Y/N

If so, how many hours on average will you work? \_\_\_\_\_

Will you live on campus, at home or in apartment/house? \_\_\_\_\_

Would you be financially able to attend school without scholarships?     Y/N

EDUCATIONAL INFORMATION

College currently attending: \_\_\_\_\_ Cumulative GPA: \_\_\_\_\_

Major: \_\_\_\_\_ Minor: \_\_\_\_\_

Average number of hours taken per semester: \_\_\_\_\_ Year graduated from BHS: \_\_\_\_\_

List all Colleges that you have attended: \_\_\_\_\_

List all scholarships/financial aid that you have applied for:

Name: \_\_\_\_\_ Awarded: Y/N Amount: \_\_\_\_\_

Name: \_\_\_\_\_ Awarded: Y/N Amount: \_\_\_\_\_

Name: \_\_\_\_\_ Awarded: Y/N Amount: \_\_\_\_\_

GENERAL INFORMATION

Who suggested you apply for this scholarship: \_\_\_\_\_

Please submit an essay explaining why you feel you should receive the C.J. Macon Scholarship. Be sure to put your name on the essay and attach it along with your college transcript to this application.

**DUE THE 2<sup>ND</sup> TUESDAY OF APRIL TO THE HIGH SCHOOL COUNSELOR**