

APPLICANT INFORMATION

First Year Applicant Second Year Applicant
(please check one)

Name: _____
(last, first, middle initial)

Male Female SSN# _____

Address: _____
(street, city, zip code)

Date of Birth: _____
(month/day/year)

Home Phone: _____ Cell Phone: _____ Email: _____

Grammar School Attended: _____
(city, state, country)

Middle School Attended: _____
(city, state, country)

List the schools (college, university, vocational) to which you applied, mark with a (*) those to which you have been accepted:

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

List the school you plan to attend: _____
(full name, city, state)(photo copy of acceptance letter or guidance counselor verification)

State your intended major if you know it: _____

Are you the first person to attend college in your family?

Yes

No

If no, list family member and school attended

1.

2.

Have you applied for any scholarships, loans or financial aid?

Yes

No

If yes, what aid have you applied for: _____

(attach photo copy)

List any loans, scholarships, or financial aid that you have received to date:

(attach photo copy)

Name of Aid

Amount

Name of Aid	Amount
_____	_____
_____	_____
_____	_____

EMPLOYMENT AND ACTIVITIES INFORMATION

If you worked during the school year or in the summer, please complete.

	Employer	Year	Hours/Week	Income earned (hourly/weekly)
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

Extracurricular, Volunteer and/or Athletic Activities:

List any activities in which you participated during high school, number of hours/week and positions held, if any (e.g. Captain)

Year

Hours/Week

Position

Extracurricular: _____

Volunteer: _____

Athletic: _____

ESSAY QUESTIONS:

To be completed on a separate sheet of paper.

1. SHORT ANSWER QUESTION

Why do you want to win this award and what will you do with the monies?

2. ESSAY QUESTION

What is the most important value to you? Why? Do you live your life according to this value? Give one example of when you have lived it to the fullest and one where you have fallen short. How has this value affected your life?

In consideration of my financial need and academic record, I respectfully petition that the Simboli Family College Award be granted to me. If any award is made to me and I do not attend school for the date specified, the granting award will be void. I attest that this information is complete and true to the best of my knowledge.

(Signature) _____ (Date) _____

Disclaimer: The decision making committee reserves the right to request additional information.

Other Requirements:

1. Please include a copy of your transcript.
2. Please include a copy of your test scores: SATs or equivalent.
3. Please include one recommendation from a teacher, coach, tutor, advisor, or counselor.

Application and materials can be mailed to:

ACS Development Corporation
180 Second Street
Chelsea, MA 02150

Please call with any questions:

(617) 889-0900
