

**Newport Harbor Alumni Association Scholarship**

**The Newport Harbor Alumni Association** is offering TEN $2,000 scholarship opportunities for graduating Seniors with priority to those who attend a Community College, Trade, Technical, or Nursing School in the Fall of 2024 (those planning to attend 4-year Universities will also be considered). This applicant’s intentions must be to fulfill the requirements of an AA Degree, Vocational Certificate, or to transfer to a 4-year University. There may be a follow up opportunity next year for a second year of support.

**Submission Deadline Friday, April 26, 2024 – to Mrs. Mack**

Applications are available in the counseling office with Mrs. Mack or [nmack@nmusd.us](mailto:nmack@nmusd.us?imgurl=https%3A%2F%2Flookaside.fbsbx.com%2Flookaside%2Fcrawler%2Fmedia%2F%3Fmedia_id%3D1557732521125546&imgrefurl=https%3A%2F%2Fwww.facebook.com%2FNewportHarborAlumni%2F&tbnid=pWt5mgfcMaDrjM&vet=12ahUKEwiW6YWlvbT1AhUxIH0KHWiB?imgurl=https%3A%2F%2Flookaside.fbsbx.com%2Flookaside%2Fcrawler%2Fmedia%2F%3Fmedia_id%3D1557732521125546&imgrefurl=https%3A%2F%2Fwww.facebook.com%2FNewportHarborAlumni%2F&tbnid=pWt5mgfcMaDrjM&vet=12ahUKEwiW6YWlvbT1AhUxIH0KHWiB)

PRINT ALL INFORMATION EXCEPT SIGNATURE

Completeness and neatness ensure your application will be reviewed properly.

**Applicant Information**

|  |  |  |  |
| --- | --- | --- | --- |
| Name: |  |  |  |
|  | First | Middle | Last Name |

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Gender ID: | Male | ☐ | Female | ☐ |  | Date of Birth |  | / |  | / |  |

**Contact Information**

|  |  |  |  |
| --- | --- | --- | --- |
| Current mailing address: |  | | |
|  | Street Address | | |
|  |  |  |  |
|  | City | State | ZIP |

|  |  |  |  |
| --- | --- | --- | --- |
| Your permanent address: |  | | |
| (if different than above) | Street Address | | |
|  |  |  |  |
|  | City | State | ZIP |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Cell #: | ( |  | ) |  | - |  |  | Alternate Phone #: | ( |  | ) |  | - |  |
|  | | | | | | | | | | | | | | |
| E-mail: |  | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | |

What is your preferred method of communication? \_\_\_\_\_\_\_\_\_\_\_\_ What is the best time to reach you? \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**School Information**

College, Trade, Technical or Nursing School enrollment status will be:  Full-time

Major or course of study: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2 year \_\_\_ or 4 year \_\_\_ School

Expected college name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and graduation date: Month \_\_\_\_\_ Year \_\_\_\_\_

If attending a Community College, have you applied (or are you planning to apply) for the California College Promise Grant or the California College Promise Program?  Yes  No

Student will:  Live on campus  Live off Campus  Commute from Home

Student will pay:  In-state Resident Tuition  Out-of-State Tuition

**FINANCIAL FORM**

If you are a dependent student, please have your parents help you complete this form using their 2023 Federal Income Tax Return. If your parents have not yet filed taxes, they may use information from their 2022 tax return or estimated numbers. You qualify as a dependent student if you are under 24 years of age and are not: (1) a ward of the court; (2) married and living away from your parents; (3) you have not been claimed by your parents for two consecutive years and have earned at least $4,000 in each of those two years; (4) you served in the military.

If you are an independent student and married, information about you and your spouse must be included. If you are an independent student, you do not need to include information about your parent’s finances. Figures should be taken from your 2023 Federal Income Tax Return. If you have not yet filed taxes, you may use numbers from your 2022 tax return or estimated numbers. You are an independent student if you are 24 years of age or over. If you are under 24 years of age, you may claim independent status only if you (1) are a ward of the court; (2) are married and living away from your parents (3) Have not been claimed by your parents for at least two consecutive years and have earned at least $4,000 in each of those years; (4) have served in the military.

I am using: ☐ actual numbers from my 2023 tax return ☐ estimated or 2022 numbers (verification may be required)

**Financial Information**

**To be considered for a scholarship award, this section must be filled out completely.**

☐ I am a dependent student. The information below is from a parent/guardian.

☐ I am an independent student, not claimed by a parent/guardian. If married, the #s below includes my spouse.

|  |  |
| --- | --- |
| 1. Marital Status:   ☐ Married ☐ Divorced ☐ Separated ☐ Widowed ☐Single ☐Domestic Partnership | |
| 1. Adjusted Gross Income (Form 1040): | $ |
| 1. Total number of family members living in the household and primarily supported by the reported income: |  |
| 1. Of the total number of family members in question 2, how many number of students are attending college at least half-time during the next school year (including applicant, exclude parents): |  |
| 1. Special family expenses (please explain them in your essay) 2. Do you help with family expenses? If yes, how? | $ |
| 1. Student’s employment/job: How much are you making per week? 2. How many hours do you work? \_\_\_\_ per week | $ |

**Anticipated Cost of Attendance**

|  |  |  |
| --- | --- | --- |
| 1 | Annual cost of tuition: | $ |
| 2 | Annual cost of books and supplies: | $ |
| 3 | Cost of food and housing: (If not living at home with parents) | $ |
| 4 | Cost of transportation: | $ |
| 5 | **Total estimated cost of attendance:** | **$** |
| 6 | Total amount of anticipated financial aid, including other  scholarships and grants from the school you plan to attend.  Grants: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Scholarships: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ |

**NHHS School Activities (include # of years, # hours/week if applicable)**

☐ AVID \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ☐ Athletics \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

☐ CTE Courses \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ☐ ROP Courses \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

☐ Music/Arts/Dance/Drama \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ☐ Student Leadership\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Other \_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Essay**

In an essay of 500 words, please answer the following:

* What is your intended major course of study at a vocational school, community college, or university? Why?
* What is the driving force, inspiration or motivation for you to go to this college?
* Tell us about your experience with community service. Who have you helped and how have you given back to the community in the past and how do you plan to help others in the future?
* If you have gone through a CTE program, tell us what your experience has been like.
* Tell us about your on-campus involvement: clubs, athletics, student leadership, etc.
* Why do you deserve this scholarship?

**Certification**

*I acknowledge all decisions are final. I certify I meet eligibility requirements of the program and the information provided is complete and accurate to the best of my knowledge. If requested, I will provide proof of information, including a copy of my U.S. Income Tax Return or my parents’. Falsification of information may result in termination of any award granted.*

|  |  |
| --- | --- |
| Applicant’s Signature: | Date: |

☐ Would you be willing to allow us to use your photo to help promote scholarships to other NHHS students? Y/N

**Application Checklist**

The NHHS student is responsible for submitting all materials to Mrs. Mack in the Counseling office on time. If you have questions, contact Mrs. Mack at nmack@nmusd.us or (949) 515-6376. **Incomplete applications will not be evaluated. This application becomes complete and valid only when all of the following materials have been received:**

☐ Student Application

☐ Student Essay

☐ Submit proof of enrollment for the next quarter/semester of school to be attended

☐ Copy of Current Transcripts, even if final grades are not yet available.

☐ Senior Photo (hard copy or good quality electronic, no selfies please!)

☐ Letter of recommendation

Thank you for your interest in participating with the NHHS Alumni Association Scholarship selection process.

**DEADLINE: 4:00pm Friday, April 26th, 2024**