



I hereby apply to have my student considered a candidate for the 2022 DOUGLAS W. LINCOLN SCHOLARSHIP. Please print your answer clearly. The application is due by Friday, May 6.

Name of student: \_\_\_\_\_

Student works outside of school at \_\_\_\_\_ and receives \$\_\_\_\_\_ per week.

Family information

Table with 4 columns: Names of other children, Age, School or Occupation, Year in School or College. Includes 5 rows of blank lines for data entry.

Employment information

I am employed at \_\_\_\_\_ (Employer's Name) \_\_\_\_\_ (Kind of Work) \$\_\_\_\_\_ (Salary)
If business owner, indicate \_\_\_\_\_ (Kind of Business) \_\_\_\_\_ (Number of Employees) \$\_\_\_\_\_ (Salary)
My spouse is employed at \_\_\_\_\_ (Employer's Name) \_\_\_\_\_ (Kind of Work) \$\_\_\_\_\_ (Salary)
If business owner, indicate \_\_\_\_\_ (Kind of Business) \_\_\_\_\_ (Number of Employees) \$\_\_\_\_\_ (Salary)

Housing information

I rent my home at \_\_\_\_\_ (Address), paying \$\_\_\_\_\_ per month.
My landlord is \_\_\_\_\_ (Name) \_\_\_\_\_ (Address).
I own my home at \_\_\_\_\_ (Address), which is assessed for \$\_\_\_\_\_, valued at \$\_\_\_\_\_, with a mortgage of \$\_\_\_\_\_. If you rent part of your home, give monthly rental income: \$\_\_\_\_\_.

Scholarship candidate information

My student desires to attend \_\_\_\_\_ (Name of Institution) to study \_\_\_\_\_ (Major) to pursue \_\_\_\_\_ (Profession).

I estimate the college cost will be:

Tuition \$ \_\_\_\_\_  
 Room/Board \$ \_\_\_\_\_  
 Traveling \$ \_\_\_\_\_  
 Books \$ \_\_\_\_\_  
 Miscellaneous \$ \_\_\_\_\_  
 Total \$ \_\_\_\_\_

Sources and amount of funds available to finance this student's college expenses for the academic year 2020-2021.

Savings of my son/daughter \$ \_\_\_\_\_  
 Savings of parents \$ \_\_\_\_\_  
 Insurance or Trusts \$ \_\_\_\_\_  
 Anticipated summer and/or part-time employment earnings of son/daughter per year \$ \_\_\_\_\_  
 Amount available from parents' earnings per year \$ \_\_\_\_\_  
 Other (scholarships, TAP, grants and/or financial aid, etc.) \$ \_\_\_\_\_

Of the above estimated yearly cost of \$ \_\_\_\_\_, I can pay \$ \_\_\_\_\_.

Explain any other circumstances that have a bearing on the financing of the education of your son/daughter: \_\_\_\_\_

**Income Information:**

2021 Total number of exemptions \$ \_\_\_\_\_  
 2021 IRS adjusted gross income \$ \_\_\_\_\_  
 2021 IRS taxable income \$ \_\_\_\_\_  
 2021 U.S. income tax paid \$ \_\_\_\_\_

CERTIFICATION: All the information provided on this application is true and complete.

\_\_\_\_\_  
 (Signature of student) (Signature of Parent/Guardian) (Date)

**Please return the completed application by Friday, May 6 to Mrs. Horan in the main office at Albany High, or you can mail to her at 700 Washington Ave., Albany, NY 12203. All applications must be received by May 6.**



**Albany  
High  
School**

Jodi Commerford  
Principal



700 Washington Ave. Albany, NY 12203 | P: (518) 475-6200 | F: (518) 475-6202 | albanyschools.org/albanyhigh | AlbanyHighFalcons

**SUPPLEMENTARY INFORMATION FORM  
DOUGLAS W. LINCOLN SCHOLARSHIP**

**APPLICANT'S NAME:** \_\_\_\_\_

**ID#:** \_\_\_\_\_ **GRADUATION DATE:** \_\_\_\_\_

To the applicant: Please complete the information below and return it, with your application, to Mrs. Horan in the main office on or before May 6.

**School Activities:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Out-of-school Activities:**

\_\_\_\_\_  
\_\_\_\_\_

**Honors and Awards:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Grade Point Average:** \_\_\_\_\_

**Rank in Class:** \_\_\_\_\_

**CEEB Scores:** SAT \_\_\_\_\_ (Verbal) \_\_\_\_\_ (Math)

(Should you not have the GPA, Rank or Scores, we will complete it for you.)