

What college, university or vocational school do you plan to attend? _____

What will be your major course of study and what are your educational plans:

Do you have any special financial needs that the Scholarship Committee should know about? Please ask your parents. This information is used for selection process ONLY and will NOT be disclosed to anyone.

What was the adjusted gross income for your parent(s) or guardian(s) for **last year**? _____

The applicant herewith consents that the Scholarship Selection Committee be fully informed as to the applicant's scholastic standing, character, and any other factors that may have a bearing on this application.

Signature of Applicant **Date**

AFTER COMPLETING THIS SECTION OF THE APPLICATION, PRESENT THE ENTIRE FORM TO YOUR SCHOOL COUNSELOR FOR CERTIFICATION.

DEADLINE: MAIL TO SMTAR Scholarship Foundation to reach us by: 4:00p.m. on APRIL 10, 2026.

