

**Delegate Justin D. Ross
District 22
2010 Scholarship Application**

Please print legibly or type. Answer every question.

If you cannot complete your answer in the space provided, attach a separate sheet of paper with your name and social security number at the top that lists the full question and your answer. For such a question, please write "See Attached" on the application.

Mr. ___ Mrs. ___ Ms. ___ Miss ___

Name Social Security# Home Phone Work Phone

Address on driver's license or voter registration card Date of Birth

Years at this address: Single: ___ Married: ___ U.S. Citizen: Yes / No

Have you received a House of Delegate Scholarship in the past? Yes / No

If yes, please name the Delegate(s), amount(s), and year(s) received: _____

I will receive my diploma from _____
High School / College Date

I took the SAT / ACT on _____ SAT / ACT Scores _____ / _____ Last Semester's GPA _____
[if you have not completed at least one full year of college] Verbal Math

To date I have completed _____ years of education. School presently attending _____

Cumulative Grade Point Average: _____
High School College

Schools I have applied to:

1st choice school _____ 2nd choice school _____

Other Schools I have applied to:

I will be a ___ full-time ___ part-time student. If part-time, credit hours per semester: ____.

I will be attending College / University / Technical School next fall as a:
___ freshman ___ sophomore ___ junior ___ senior ___ graduate student

List any extracurricular, volunteer, religious, civic and/or community service activities in which you have participated: _____

List special honors you received, achievements, advanced courses that were taken for credit, or outside activities you participated in during the past three years.

Please describe other financial resources that you expect to receive, including scholarships and family support.

If you are aware of any additional information that might be of help to the Scholarship committee, please include it here. Include information relating to financial need and unusual situations that you feel would be relevant to the committee.

Does anyone claim you as a dependent Yes / No If so, what is your total family income as listed on your FASFA: \$_____

ESSAY - Please attach a statement of not more than 300 words describing what you hope to accomplish at the institution of higher learning you are planning on attending, and how you plan on utilizing this education after your graduation. [At the top of your essay, please include your name and address]

Letters of recommendation, while not required, are encouraged Please choose up to three people who are familiar with your personality, skills and potential. You may wish to choose a teacher, employer or any individual who may have knowledge of your work/school experience or achievements. You may include the letters in sealed envelopes with your application, or you may have them submit the letter directly to the office. Letters must arrive no later than April 30, 2010.

_____ I have checked with the office to confirm that I am a resident of District 22 and that Delegate Justin D. Ross is my representative in the Maryland House of Delegates.

Parent or Guardian's Signature
[If applicant is under 18 years old]

Date

Applicant's Signature

Date

After completing this form, use the attached checklist to insure you are including all of the required parts to make this application complete. Mail the packet to:

Delegate Justin D. Ross
Maryland House of Delegates
6 Bladen Street, Room 15I
Annapolis, MD 21401
ATTN: Scholarship Application

If you have any questions, please call 301-858-3652.