

Application NWABSD—June Nelson Scholarship

Name: _____ Date of Birth: _____
 High School Graduation date: _____

Permanent Address: _____ Phone Number: _____

Parent(s)/Guardian(s) _____

Expenses	Amount (full year)	Resources	Amount (full year)
Tuition & fees		PELL	
Room & Board		BIA/IRA	
Books/Supplies		KIC	
Travel		NANA	
Personal		Student Loan	
Other: (Specify)		Estimated Family Contribution	
		Estimated Student Contribution	
		Other: (specify)	
Total:	\$	Total	\$

Do not write in this portion DISTRICT USE ONLY

Needs _____ Assets _____

 Student Signature

 Date

 Counselor/Principal's Signature

 Date