



DEBARTOLO FAMILY FOUNDATION

Scholarship Application School Year 2008-2009

Please type or print. All portions of this application must be completed.

Applicants First Name: _____ Middle: _____ Last: _____

Address: _____ City: _____ State: _____ Zip: _____

Telephone: (_____) _____ - _____ Birth date: _____ SS #: _____

Cell Phone: (_____) _____ - _____ Email: _____

High School Attended: _____ Start Date: _____ Diploma date: _____

School Address: _____ City: _____ State: _____ Zip: _____

Date you plan to enter college: _____

COLLEGE PLANS

Indicate below the college(s) you'd like to attend or have applied to:

Colleges:	Accepted Yes/No
_____	_____
_____	_____
_____	_____

Course of study you plan to follow (show first and second choices):

1. _____
2. _____

What other scholarships have you received or have applied to? Please list all awards along with dollar amount. (Indicate if it is a one-time scholarship or annual.) (Use separate sheet if necessary)

Name of Scholarship	Annual Yes/No	Amount
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
Total		\$ _____

FAMILY INFORMATION

Name of parents or guardian: _____

Address: _____ City: _____ State: _____ Zip: _____
Address if different from Applicant

Telephone: (_____) _____ - _____

Father's Employer: _____ Work Phone: (_____) _____ - _____

Position/Title: _____ Cell Phone: (_____) _____ - _____

Email: _____

Address: _____ City: _____ State: _____ Zip: _____

Mother's Employer: _____ Work Phone: (_____) _____ - _____

Position/Title: _____ Cell Phone: (_____) _____ - _____

Address: _____ City: _____ State: _____ Zip: _____

Email: _____

Total family annual income: \$ _____

**Please attach page 1 of your parent or guardian's 2007 and 2008 Federal Income Tax Returns
 Application WILL NOT be considered without this information.**

List other children in family below:

Name	Age	Attending College? Yes/No	Planning to Attend? Yes/No
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

REFERENCES:

This part is to be completed by your high school Principal, Vice Principal, or Guidance Counselor. This part should be completed only after you have completed the entire application and should be included with your application. **DO NOT MAIL SEPARATELY.**

Applicant/Student's Name: _____

High School _____

Address _____ City _____ State _____ Zip _____

Student GPA _____

Student ranks _____ in a graduating class of _____ students.

In character, personality, school citizenship, development, conduct and leadership, how would you classify this student?

_____ Top 10% of the class

_____ Average

_____ Below average

Did applicant receive any special recognition for school activities? If so, please explain.

Anything additional you feel would qualify this student for scholarship consideration?

I certify that the information contained herein is correct to the best of my knowledge. I also certify that the data related to scholastic performance is from a current and official transcript.

 Signature

 Title

 Date

<u>Application Checklist</u>	
<input type="checkbox"/>	Completed Application, Signed by Student (Page 3)
<input type="checkbox"/>	Principal, Vice Principal or Guidance Counselor Signature (Page 4)
<input type="checkbox"/>	Copy of 2007 & 2008 Federal Income Tax Return (Page 1 of Tax Form)
<input type="checkbox"/>	Completed Essay
PLEASE DO NOT SEND TRANSCRIPTS OR GRADES	

**Application & all required attachments should be mailed together and received on or before
 April 3, 2009 to:
 DeBartolo Family Foundation Scholarship
 15436 N. Florida Avenue, Suite 200
 Tampa, FL 33613
 813-964-8302**