Application Form for Kings County Retired Teachers' Association SCHOLARSHIP

	(a) Be a high	for this scholarship the applicant must: school graduate of this year
	(d) Have bee	a teaching career accepted to a college or university astic ability and financial need
NAME:		
ADDRESS: _		
AGE:	DATE OF BIRTH:	PHONE:
FATHER'S N	AME:	OCCUPATION:
MOTHERS' NAME: OCCUPATION:		OCCUPATION:
NO. OF YEA	RS RESIDENT IN KINGS CO	INTY: E-MAIL ADDRESS
TOTAL FAMILY INCOME: BELOW \$40,000 \$40,000- \$75,000 OVER \$75,000		
NUMBER OF	BROTHERS AND SISTERS	I SCHOOL AND UNIVERSITY AND THEIR GRADE LEVELS:
NAME OF U	NIVERSITY AT WHICH YOU	IAVE BEEN ACCEPTED:
COURSE YO	U INTEND TO FOLLOW:	
EXTRA-CUR	RICULAR ACTIVITIES AT SC	lOOL:
INTERESTS	OR ACTIVITIES OUTSIDE O	SCHOOL:
do you ha	VE SUMMER EMPLOYMENT	IF SO, WHERE?
WERE YOU	EMPLOYED DURING THE SO	HOOL YEAR?
DATE:	SIGN	TURE:
		VARD THIS APPLICATION, A COPY OF YOUR HIGH SCHOOL S OF RECOMMENDATION TO:
		Donna Belyea CRTA Scholarship Committee

949 Route 860, Smithtown, NB E5N 4A5