

List (in order of preference) college/technical schools you are considering.

Name of College/Technical School	Applied?	Accepted?	Not Yet Notified?
1. _____	___ Yes ___ No	___ Yes ___ No	___
2. _____	___ Yes ___ No	___ Yes ___ No	___
3. _____	___ Yes ___ No	___ Yes ___ No	___

Father Name: _____ **Occupation:** _____

Mother Name: _____ **Occupation:** _____

Total Household Income (check the range)

___ less than \$12,000	___ \$40,001-\$60,000
___ \$12,001-\$20,000	___ \$60,001-\$80,000
___ \$20,001-\$40,000	___ above \$80,000

Number of other children in family: _____ **Ages:** _____

Number now attending college: _____ **Current Status:** ___ Fresh ___ Soph ___ Jr ___ Sr

Student's place of employment/work experience: _____

Are your parents ACTIVE members of the NL Athletic Booster Club? ___ Yes ___ No

NOTE: You must have (2) North Lamar Coaches to complete a Coaches Evaluation Form.
All information will be kept confidential. Please list the names of the coaches you have asked to complete these forms:

1. _____ 2. _____

Student's Signature: _____ **Parent's Signature:** _____

(Applications containing inaccurate information will be disqualified from consideration)

***** RETURN THE COMPLETED APPLICATION TO THE NL HIGH SCHOOL OFFICE
BY APRIL 26TH *****

*SAT Score: Math _____ Verbal _____ Total _____ *ACT Score: _____

*GPA: _____ *Class Rank: _____

*To be completed by school counselor.

Counselor Signature: _____

Coaches Evaluation Form
North Lamar Athletic Booster Club Scholarship Application
Deadline: April 26, 2010
2009-2010

Student Name: _____

Ratings:

The purpose of this form is to gain information about this student's potential for success in a college or technical program. Please rate the student in each category using the designated numerical rating scale. Thank you for your assistance.

Category	Below Avg (1 or 2)	Avg (3 or 4)	Above Avg (5 or 6)	Excellent (7 or 8)	Exceptional (9 or 10)
Motivation to excel					
Academic/Vocational growth potential					
Disciplined workout habits					
Sense of responsibility and leadership					
Emotional maturity					
Personal character and sportsmanship					

Is there any additional information about this applicant which you feel would be helpful to the scholarship committee?

Name: _____ **Date:** _____

Please indicate sport(s) which you coach: _____

Signature: _____

ALL COMMENTS WILL BE CONFIDENTIAL
Coaches please return evaluation forms to the NL High School Office by April 24th.
Students will not view this form.