

# Best Buddies Living **Scholarship Application**

1. Name:

a. First name -- Middle name(s) -- Last name: \_\_\_\_\_

b. If it is different than your formal name, what do you prefer to be called?

2. Have you applied for a Best Buddies Living Scholarship before? Yes (Date: \_\_\_\_\_)  No

3. How much per month are you requesting in program reduction?

4. Home address: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

5. Primary telephone: \_\_\_\_\_ 6. Secondary telephone: \_\_\_\_\_

7. E-mail: \_\_\_\_\_

8. Date of Birth (MM/DD/YYYY): \_\_\_\_\_

9. Are you currently employed? Yes  No

Employer's Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Employer Phone number: \_\_\_\_\_

10. What is your annual income/salary? \_\_\_\_\_

11. Will anyone else be contributing to you rent/program cost? If so, please explain who and what portion of the expense.

12. Essay: What does the scholarship committee need to know about you that will help us determine eligibility? 250 words or less.

By signing my name below, I confirm that all of the information provided above is true and correct to the best of my knowledge.

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**