



WOBL RADIO INC. ♦ WDLW RADIO INC.

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www.woblradio.com & www.wdlwradio.com

♦ STREAMING LIVE ♦



## The Jerry Garbash Memorial Scholarship Presented by WOBL and WDLW Radio Inc.

### SCHOLARSHIP APPLICATION

(Please type or print legibly)

Name \_\_\_\_\_ Phone# \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_

Age \_\_\_\_\_ Date of Birth \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

What college, university, or accredited technical school(s) have you been accepted to, or currently attending? Please list in order of probability of attending:

\_\_\_\_\_

What is, or what will be your major course of study? \_\_\_\_\_

2<sup>nd</sup> Choice \_\_\_\_\_ 3<sup>rd</sup> Choice \_\_\_\_\_

Anticipated tuition cost per year \_\_\_\_\_ For 4 years \_\_\_\_\_

Have you received any other scholarships? If yes, please provide names & value.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Would you be financially able to attend college without the aid of this scholarship? \_\_\_\_\_.

Will you be working over the summer to help pay for the cost of school? \_\_\_\_\_. If yes, where?

\_\_\_\_\_.

Estimated amount of family contribution toward college expenses. \_\_\_\_\_.



## PARENT INFORMATION

Father's Name \_\_\_\_\_ Phone # \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Place of Employment \_\_\_\_\_ Job Title \_\_\_\_\_

Mother's Name \_\_\_\_\_ Phone # \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Place of Employment \_\_\_\_\_ Job Title \_\_\_\_\_

Are you eligible for any tuition reimbursement from your parent's employment? \_\_\_\_\_

If yes to the previous question, please explain the financial impact of how it applies to tuition, books, room, and board.

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Do you have any siblings who are presently attending college? \_\_\_\_\_.

If yes to the previous question, what college or university do they attend?

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