

Deever Family Scholarship

UNIVERSITY INFORMATION

College you plan to attend this fall _____

Have you been accepted yes no

Intended Major _____

Enrollment Status full-time (12+ hours) part-time (6-11 hours)

PARENT/GUARDIAN INFORMATION

Total household income in 2019 _____

Number of family members in household _____

Number of children in college for 2021-2022 academic year _____

CERTIFICATION

I, the student, completed this application and certify that the information provided in this application is complete and accurate to the best of my knowledge. I understand that falsification of information will result in termination of any scholarship awarded. I certify that I have read the instructions and will comply with all requests for documentation for financial need and academic status. Should I receive a scholarship, I will notify the CFOV of any change of plans, and the CFOV may use my name and likeness in publicity materials related to the CFOV.

Signature

Date

Parent or Guardian Signature
(if applicant is under 18)

Date

Principal Endorsement

Date