

**APPLICANT INFORMATION****First Name**

Minnie

**Last Name**

Mouse

**Middle Initial**

M

**Permanent Mailing Address**PO Box 1234  
Friday Harbor, Washington 98250  
United States**Phone**

(360) 378-1001

**Type**

Home

**Email**[info@sjicf.org](mailto:info@sjicf.org)**Date of Birth**

02/01/2005

**Preferred Pronouns**

She/Her

**COLLEGE INFORMATION****College**

WWU

**Expected Graduation Date (mm/yy)**

06/27

**Address**Bellingham, Washington 98225  
United States**Student ID#**

123456789

**College GPA**

3.5

**What level will you be starting in Fall 2025?**

Junior

**Will you be attending for the full academic year?**

Yes

**Declared or intended major**

Biochemistry

**What degree or certification do you expect to receive?**

BS

&amp;nbsp;

**Please provide detail on your costs for the upcoming academic year.****Tuition and Fees**

\$18,000.00

**Books and Supplies**

\$4,000.00

**Room and Board**

\$12,000.00

**Will you be living in campus housing?**

No

**Total Annual Program Cost**

\$34,000.00

**PARENTAL/GUARDIAN INFORMATION**

If you are a high school senior or undergraduate student under the age of 24, are single, and have no children, you are considered a dependent student for financial aid purposes; parental/legal guardian information must be supplied by a dependent student. Financial information inclusive of income and assets is required for responsible parties, which for this application, can be parents, stepparents, and/or legal guardians. A dependent student should have a least one responsible party but could have more. For example, a student whose parents have divorced and both remarried would have four responsible parties.

**RESPONSIBLE PARTY 1**

Mom Mouse

**Relationship to Applicant**

Mother

**Occupation**

Lawyer

**Employer**

Self-employed

**RESPONSIBLE PARTY 2**

Dad Mouse

**Relationship to Applicant**

Father

**Occupation**

Chef

**Employer**

Bistro Mouse

**RESPONSIBLE PARTY 3**

Stepmom Mouse

**Relationship to Applicant**

Stepmother

**Occupation**

Bus Driver

**Employer**

SJISD

**FINANCIAL INFORMATION - CONFIDENTIAL****Annual Income Before Taxes for 2024**

(See line 11 of IRS 1040 if filed) If responsible parties filed as Married Filing Jointly, line 11 will be a combined total. Please use the radio buttons to indicate if an income field includes the annual income of more than one responsible party.

**Responsible Party 1**

\$125,000.00

**Does the above amount include the income for more than one responsible party?**

No

**Responsible Party 2 (enter 0 if not applicable)**

\$145,000.00

**Does the above amount include the income for more than one responsible party?**

Yes

**Responsible Party 3 (enter 0 if not applicable)**

\$0.00

**Does the above amount include the income for more than one responsible party?**

No

**Responsible Party 4 (enter 0 if not applicable)**

\$0.00

**Does the above amount include the income for more than one responsible party?**

No

**Self**

\$12,500.00

**Does the above amount include the income for a spouse?**

No

**Spouse (enter 0 if not applicable)**

\$0.00

**Other Income (social security, child support, etc.)**

\$0.00

**TOTAL FAMILY INCOME EARNED IN 2024**

\$282,500.00

**Assets and Other Resources**

**Family Savings, Investments & Trusts**

\$25,000.00

**Student's Savings**

\$5,000.00

**Student's Trusts, Funds or Other**

\$0.00

**Scholarships, Grants & Loans**

Type (Scholarship/Grant/Loan)	Source (University, Service Organization, Bank, etc.)	Amount
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Pell Grant	DE	\$5,000
Scholarship	Lion's Club	\$2,000
Grant	University	\$5,000
Work Study	University	\$2,000

**Total Number in Family**

7

**Number of Immediate Family Members in a Post-Secondary Education Program**

2

**Over the past year, has anything changed that affects your financial need for this scholarship or the amount you're receiving? (i.e. siblings in college, health concerns, family situation, etc)**

My younger brother will be starting college in the fall, and I am no longer receiving one of the original \$2,000 scholarships that was only awarded for my freshman and sophomore years.

**SUPPORTING DOCUMENTS**

The following support materials MUST be received in the San Juan Island Community Foundation office in order to have your application reviewed. **If your completed application and support documents are not received by April 23, 2025, your application will be considered incomplete and not eligible for review.**

**1. PERSONAL ESSAY**

Prompt #1: Test Essay

Submit a short (maximum 600 words) essay using one of the three prompts below. Please identify which prompt you are answering. This essay should demonstrate your ability to organize thoughts and express yourself; please do not use artificial intelligence. Grammar, spelling, and clarity are important.

**2. OFFICIAL COLLEGE TRANSCRIPTS**

Please have the latest official transcript sent directly from your college to the San Juan Island Community Foundation via email (scholarships@sjicf.org) or mail (PO Box 1352, Friday Harbor, WA 98250). Please ensure you've submitted your request in plenty of time to be processed and received by the deadline.

**3. FAFSA/WASFA SUBMISSION SUMMARY**

- [Test-Upload-File.pdf](#)

**IMPORTANT!** Your application will not be considered complete until all of the above items have been received at the San Juan Island Community Foundation office. All materials must be received by April 23, 2025. If you'd like to check the status of your application, please send an email to [scholarships@sjicf.org](mailto:scholarships@sjicf.org) or call 360-378-1001.

**VERIFICATION**

The information included with my application is true and accurate in all respects, and I intend to pursue a degree in

higher education. I understand that, if selected, the awarding of funds is contingent upon my full-time enrollment in an accredited institution, and that the funds will be paid directly to the institution and used toward the cost of my education. I authorize SJICF to share this information with SJICF staff and Scholarship Committee members. I authorize SJICF staff and Scholarship Committee members to contact school officials for additional information, if needed.

**Verification Agreement**

- I have read and agree to the above verification.

**Signature**



**Printed Name**

Minnie Mouse

**Date**

02/28/2025