

Personal Information (This will be kept confidential.)

Full Name:	Email address:
	Cell phone:
Home Phone:	List any unusual demands on family income:
Full Address:	Date of Birth:
Class rank (HS students only) ____ out of ____	School: HILLSBORO HIGH SCHOOL
Income of Parent: (as reported on IRS form 1040)	I am applying as: ____ Graduating high school student
College Cost (Anticipated cost of tuition, housing, & fees:	Career Goals:
Available Assets: Please provide your family's expected contribution (EFC) according to the FAFSA finding:	Other scholarships, grants, and financial aid you have already received:

The following items have been included with this application:

____ Two letters of recommendation

____ Personal Essay

____ FAFSA

PLEASE RETURN THE COMPLETED MATERIALS TO:

HILLSBORO HIGH SCHOOL COUNSELOR'S OFFICE
522 E. TREMONT STREET
HILLSBORO, IL 62049

**MUST BE RECEIVED BY: 1st Round – March 5th
2nd Round-April 2nd**