

Returning College Sophomore Application

Deadline for Filing is July 31, 2025

Application pertains to students e	ntering into the second	year of an accredited two or four year college.
Please Print or Type the informat		year or arracereatica two or roar year conege.
Date:	,	
Student Information		
Full Name:		Email address:
Home Address:		Phone #
Father:		Occupation:
Mother:		Occupation:
Family members attending college next year		
(number only):		
Expected college expenses		
Tuition: \$		Room and Board: \$
Books and Lab Fees: \$		Transportation: \$
		Total Expenses: \$
Family Gross Income Level	Check appropriate	٦
Below \$50,000		
\$50 - \$100K	П	
\$100K - \$150K		_
\$150K - \$200K		
\$200 - \$300K		
\$300K +		
		_
Have you worked while attending	g college? Yes □ No □	
If yes please explain type of work	experiences:	
Company Name	Job Description	

Please list other scholarshi	ps or financial assistan	ce you are receiving	including spec	ific dollar amounts
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Name		Amount		
Please list any additional factor(s) or financial considerations that will assist the WASA Scholarship Committee in weighing your situation to determine your qualification for this scholarship assistance. Please include all community service work and projects.				
** Dlacas includes a service formation	out avados / would from the college	an attended as a Freshman		
** Please include a copy of pres	ent grades / marks from the college y	ou attended as a Freshman		
Have you participated in sports ir	n High School or College? Yes \Box No \Box			
List High School Sports activities:				
List College Sports activities:				
Applicant's signature		Date		
Father/Guardian signature		Date		
Mother/Guardian signature		Date		

BE ASSURED THAT ALL THE ABOVE INFORMATION IS STRICTLY CONFIDENTIAL

Please return to:

Westborough Athletic and Social Association

P.O. Box 165

Westborough, MA 01581

Attn: Scholarship Committee