

GREAT NECK STUDENT AID FUND, INC.
BIOGRAPHICAL QUESTIONNAIRE

The questions on this form are designed to collect information about your background, your interests, and your plans. Your answers to these questions will be used only in connection with your application to the Great Neck Student Aid Fund and will be divulged only to qualified persons who must see them in the course of reviewing your application. In some cases, you might need to consult with your parent/guardian to complete this form. We also ask that the parent/guardian who assists you also sign this form to verify the information.

YOU – THE APPLICANT – Please print all of your answers (this is a fillable PDF, so you can fill it in, save it and then email to your GNSAF advisor)

1. **Name in full:** _____
Last **First** **Middle**
2. **Home address:** _____
Number/Street **Town/State** **Zip Code**

IF YOUR PRESENT MAILING ADDRESS IS DIFFERENT FROM YOUR PERMANENT HOME ADDRESS, PLEASE COMPLETE THE FOLLOWING

3. **Present home address:** _____
Number/Street Town/State Zip Code

Present home address is current through: _____

4. **Phone Numbers:** _____
Home Number Cell Number
5. **Email Addresses:** _____
Email provided by school Personal (non-school) email
6. **Date of Birth:** _____
(Month) (Day) (Year) Age at last birthday
7. **Place of Birth::** _____
Town/City/State Country
8. **Citizenship::** US: _____ Other _____
List Country

9. **If you are not a citizen**, do you have a Permanent Residency card (Green card)? _____
 Are you on DACA? _____ If yes, do you have a Social Security Number _____

YOUR FAMILY

PARENT 1/GUARDIAN 1's information:

1. Parent 1/Guardian 1's Full Name _____ Are they living? _____
2. Parent 1/Guardian 1's Home Address: _____
3. Parent 1/Guardian 1's Email: _____
4. Parent 1/Guardian 1 cell phone: _____
5. Parent 1/Guardian 1's Occupation: _____
6. Employer for Parent 1/Guardian _____
7. Address of Employer for Parent 1/Guardian 1: _____

PARENT 2/GUARDIAN 2's information:

1. Parent 2/Guardian 2's Full Name _____ Are they living? _____
2. Parent 2/Guardian 2's Home Address: _____
3. Parent 2/Guardian 2's Email: _____
4. Parent 2/Guardian 2 cell phone: _____
5. Parent 2/Guardian 2's Occupation: _____
6. Employer for Parent 2/Guardian 2: _____
7. Address of Employer for Parent 2/Guardian 2: _____

If you live with someone other than a parent/guardian, please indicate relationship: _____

SIBLINGS

Please list all of your siblings, ages and grade in school (or if out of school, what they are doing):

Name	Age	Grade in school	If out of school, what they are doing
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Name	Age	Grade in school	If out of school, what they are doing
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Name	Age	Grade in school	If out of school, what they are doing
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FINANCIAL SUPPORT

Which parent provides you with financial support? Parent 1/Guardian 1 ___ Parent 2/Guardian 2 ___

If someone other than your parent/guardian provides you with financial support:

Name of person who supports you _____

Address of person who supports you _____

Relationship to you of the person who supports you _____

Email of the person who supports you: _____

Cell phone number of the person who supports you: _____

YOUR SCHOOLING AND ACTIVITIES

1. Please list in chronological order all of the schools you have attended in the last 5 years:

Name of School	Location	Dates of Attendance

2. Please list your extracurricular activities (not more than 4 and excluding jobs) during the past 3-4 years. Please list them in order of their interest to you (example: student government, dramatics, athletics, debating, publications, orchestra, school clubs, religious groups).

Activity	Position Held

3. Please list any distinctions/awards you have won, scholastic or otherwise:

4. Please list work and vacation experience during the last 3 years (and current):

		Activity of Job	Employer	Amount earned
9 th Grade	School year			
	Summer			
10 th Grade	School year			
	Summer			
11 th Grade	School year			
	Summer			
12 th Grade	School year			
	Summer			

5. Have you competed in or plan to compete in any national or state academic competitions?

Name of Contest	Result (if known)

6. State briefly how you plan to spend this coming summer. If you plan to work, how much do you expect to earn?

YOUR COLLEGE OR OTHER EDUCATIONAL PLANS

1. Which colleges/institutions have you applied to?

Name of College/Institution	Address	Course/major	Accepted? (yes/no/deferred)

2. If any of the schools listed are within commuting distance, do you plan to live at home or live at school? _____

3. (a) Have you applied elsewhere for financial aid? Yes ___ No ___ if yes, please complete:

Institution	Amount

(b) If you have not applied elsewhere for financial aid, please indicate why not?

Housing (you MUST consult with your parent(s)/guardian(s) to answer the following questions):

Does your Parent/Guardian rent or own the home you live in? _____

If owned, please provide market value of home _____

Does your Parent/Guardian own other property _____

If yes, please be specific _____

ADDITIONAL INFORMATION

Please use the space below for any additional comments about yourself, your family and your goals that you think will be helpful to the Selection Committee. Please feel free to attach separate pages to this form if this space is inadequate.

I HEREBY CERTIFY THAT THE INFORMATION SUBMITTED HERewith IS ACCURATE & CORRECT. I AGREE TO PROVIDE ANY OFFICIAL DOCUMENTATION NECESSARY TO VERIFY THE ABOVE INFORMATION. THE GREAT NECK STUDENT AID FUND SELECTION COMMITTEE HAS MY AUTHORIZATION AND CONSENT TO MEET WITH REPRESENTATIVES OF MY HIGH SCHOOL'S GUIDANCE OFFICE TO DISCUSS AND REVIEW THIS APPLICATION.

STUDENT SIGNATURE: _____ **DATE:** _____

PRINT STUDENT NAME: _____

I HEREBY CERTIFY THAT THE INFORMATION SUBMITTED HERewith IS ACCURATE & CORRECT. I AGREE TO PROVIDE ANY OFFICIAL DOCUMENTATION NECESSARY TO VERIFY THE ABOVE INFORMATION. THE GREAT NECK STUDENT AID FUND SELECTION COMMITTEE HAS MY AUTHORIZATION AND CONSENT TO MEET WITH REPRESENTATIVES OF MY CHILD'S HIGH SCHOOL'S GUIDANCE OFFICE TO DISCUSS AND REVIEW THIS APPLICATION, PROVIDE TRANSCRIPTS AND RECOMMENDATIONS FOR THE APPLICANT

PARENT/GUARDIAN SIGNATURE: _____ **DATE:** _____

PRINT PARENT/GUARDIAN NAME: _____