

**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):

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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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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:

<b>Name of School</b>	<b>Location</b>	<b>Dates of Attendance</b>

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).

<b>Activity</b>	<b>Position Held</b>

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

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

		<b>Activity of Job</b>	<b>Employer</b>	<b>Amount earned</b>
9 <sup>th</sup> Grade	School year			
	Summer			
10 <sup>th</sup> Grade	School year			
	Summer			
11 <sup>th</sup> Grade	School year			
	Summer			
12 <sup>th</sup> Grade	School year			
	Summer			

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

<b>Name of Contest</b>	<b>Result (if known)</b>

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

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**YOUR COLLEGE OR OTHER EDUCATIONAL PLANS**

1. Which colleges/institutions have you applied to?

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

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:

<b>Institution</b>	<b>Amount</b>

(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? Rent? \_\_\_\_\_ Own? \_\_\_\_\_

If owned, please provide market value of home \_\_\_\_\_

Does your Parent/Guardian own other property \_\_\_\_\_

If yes, please be specific \_\_\_\_\_

**Income**

Please provide your parent(s) adjusted gross income from prior year's tax return? \_\_\_\_\_

**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.

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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:** \_\_\_\_\_