

1. _____ 3. _____
2. _____ 4. _____

OTHER FINANCIAL AID

****List below all financial aid you have been awarded thus far for the current school year. If you receive an award, you must keep us informed about other financial aid received. Failure to do so may result in termination of your award. You MUST complete the FAFSA and provide us with the amount they are awarding you, if applicable.**

<u>Name of Award/Grant/Loan/Other Financial Support</u>	<u>Amount</u>
_____	_____
_____	_____
_____	_____

****Describe and give dates for any full or part-time job you have had in the last two years:**

****List extra-curricular or outside activities you have participated in during the last two years of high school. Not applicable if attending College.**

****If you do not receive financial assistance from this scholarship fund, what effect will it have on your education and what alternative plans do you have?**

****Please explain briefly anything unusual about your financial situation or other circumstances that you feel should be known by the selection committee:**

If presently attending high school, please attach a high school transcript. If you are currently enrolled or have ever attended college attach your college transcript. Transcripts DO NOT need to be official.

I certify that all information given in this application is true to the best of my knowledge.

Father/Guardian Signature Date

Mother/Guardian Signature Date

Student Signature Date

****You may provide any additional information if you wish (special circumstances, additional awards, etc.) on an 8 1/2 x 11 piece of paper. (Maximum of one additional page.) ****

APPLICATIONS ARE DUE BY MAY 31st, 2017.

**CHARLES AND HAZEL CLINE MEMORIAL SCHOLARSHIP
2017-2018 APPLICATION SUMMARY
PRINT CLEARLY OR TYPE**

Applicant Name: _____

Applicant Phone: _____

Applicant Email: _____

High School Name: _____

Graduation Date & Year: _____

High School Accumulative GPA: _____

College Name: _____

Student ID #: _____

College GPA: _____

**Mail completed applications and documents to: Key Private Bank
Patti Thompson
OH-01-10-0932 CLINE
100 Public Square, Suite 600
Cleveland, OH 44113**