

**THE HAWLEY FOUNDATION FOR CHILDREN  
PO BOX 1017 Saratoga Springs, New York 12866**

**COLLEGE INCENTIVE GRANT  
RENEWAL APPLICATION**

Applicant's Name \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail address \_\_\_\_\_ Telephone \_\_\_\_\_

Social Security # \_\_\_\_\_ Date of Birth \_\_\_\_\_

Cell Phone \_\_\_\_\_

College now attending \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

College e-mail address \_\_\_\_\_

Course of study/major \_\_\_\_\_ GPA \_\_\_\_\_

Please check your class level for the current academic year:  
Sophomore \_\_\_\_\_ Junior \_\_\_\_\_ Senior \_\_\_\_\_

Work History:

Employer/Position #Hours per Week Dates of Employment

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Current Summer  
employment \_\_\_\_\_

Do you live with parents, stepparents and /or legal guardian? (Circle one)  
If not, please explain \_\_\_\_\_

Father Stepfather Legal Guardian Other (Circle one)

Name \_\_\_\_\_

Address \_\_\_\_\_

Employer/Position \_\_\_\_\_

Mother   Stepmother   Legal Guardian   Other   (Circle one)

Name \_\_\_\_\_

Address \_\_\_\_\_

Employer/Position \_\_\_\_\_

Other family members currently living in household:

Name \_\_\_\_\_ Age \_\_\_\_\_ School/Grade level \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ School/Grade level \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ School/Grade level \_\_\_\_\_

List any other grants, scholarships, and/or loans that you will be receiving for the upcoming academic year:

Grant/Scholarship/Loan	Amount \$
_____	_____
_____	_____
_____	_____
_____	_____

**REQUIRED for Grant Renewal:**

Submit a brief essay (typed or neatly printed) describing how the Hawley Foundation College Incentive Grant has been of benefit to you. Please state why you would like to be considered for a grant again this year and include in your essay any unusual family or personal circumstances that you feel should be taken into consideration by the renewal committee.

*Please attach the following documents:* (all information is confidential)

1. Copy of current Student Aid Report (SAR) from the Free Application for Federal Student Aid (FAFSA).
2. Copy of Financial Aid Award Notification Letter(s).
3. Copy of GPA.

I/We certify that the information on this Grant Renewal application is true to the best of my/our knowledge at the time of the application. I/We agree to provide additional information to support this application if needed by the Grant Committee.

*Signature of Applicant* \_\_\_\_\_ Date \_\_\_\_\_

*Signature of  
Parent/Stepparent/LegalGuardian* \_\_\_\_\_ Date \_\_\_\_\_

Please return this application with all of the requested information and documents by **May 24** to:

**The Hawley Foundation for Children  
College Incentive Renewal Committee  
PO Box 1017  
Saratoga Springs, NY 12866**

If you have any questions in preparing this application, call 588-0824  
or e-mail [www.hawleyrenewal@hotmail.com](mailto:www.hawleyrenewal@hotmail.com).