

Maryland House of Delegates Scholarship Application
Delegate Neil Parrott – District 2A
2022-2023 Academic Year

1. Basic Information *(Please Print):*

Title: _____ First Name: _____ Middle Initial: _____ Last Name: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Social Security Number: _____
Needed for tax purposes

Date of Birth ____ / ____ / ____ Email Address: _____

Are you a current resident of Legislative District 2A? Yes ____ No ____

2. Education: *Please print the name of the school/university you are currently attending or most recently attended.*

Name of Institution: _____

Address: _____

City: _____ State: _____ Zip: _____

Year(s) Attended: _____ Degree obtained, if any: _____

GPA: _____ Number of Credits Completed: _____

3. Additional Information: *(Please print)*

School Activities: _____

Community Activities: _____

Honors, Awards, Etc: _____

Work History: _____

1. Specific Information:

I am a United States citizen and a legal resident of Maryland and would like to be considered for a Maryland House of Delegates Scholarship to:

(Must be a college/university within the State of Maryland. Exceptions only for majors not offered in this State.)

Major/Field of Study: _____

Level of education you are pursuing? *(Please note this is an undergraduate program only)*

Freshman ___ Sophomore ___ Junior ___ Senior ____

Are you a new applicant to the Maryland House of Delegates Scholarship Program? _____

Do you currently have any scholarships? _____ *If Yes, please list:* _____

What is the approximate yearly cost of your education?

Tuition: \$ _____ Books/Fees: \$ _____
Room/Board: \$ _____ Other Expenses: \$ _____

Additional comments or information which will help the Scholarship Committee in their consideration of your application: _____
