**IRVIN E. HERR FOUNDATION SCHOLARSHIP AWARD**

**APPLICATION SUPPLEMENT**

The purpose of this Application Supplement is to acquire information regarding further qualifications to receive a grant from the Irvin E. Herr Foundation Scholarship Foundation. Your answers to the following questions will be reviewed by the Board of Advisors of the Foundation. The information you submit will be used for this purpose only and will remain confidential

Please type or print your answers clearly. If additional space is needed to answer any question, please attach an additional sheet which refers to the specific question number and which continues your answer. Any additional sheets may contain more than one answer.

**APPLICANT:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last Name First Name Middle Initial

**QUALIFICATION INFORMATION:**

1. What College/University do you plan to attend?

2. Is this institution considered a not-for-profit entity as defined by the Internal Revenue Service Section 501(c) (3)? Yes No

**FINANCIAL AID INFORMATION:**

A. Household Information:

1. Total size of your permanent household, including all children and parents during the school year.\_\_\_\_\_\_\_\_\_
2. Of those persons considered in your answer to Question 1 above, how many will be enrolled full-time students at a post-secondary institution during the school year (including yourself)?
3. What is your household’s cumulative Adjusted Gross Income as reported for Federal Income Tax purposes (line 37 of Form 1040)? $

B. Other Aid:

1. Projected Cost of Attending this Institution:
2. Other sources of financial aid? Amount of each source?

**Please return completed Application and any supporting documents to:**

 Wilmington Trust Wealth Advisory Services

 Irvin E. Herr Scholarship Foundation

 ATTN: Karen Cummins

 285 Delaware Avenue

 Buffalo, NY 14202

 kcummins@wilmingtontrust.com