

Berry College  
Chaplain's Office  
PO Box 490460  
Mount Berry, GA 30149

Date:  
Application Year:

**Application for Thomas B. Dixson Family memorial Scholarship**

**Applicant's Full Name:**

**Home Address:**   
(House number and street) (City) (State) (Zip Code)

**On Campus Address (if applicable):**  
  
(Box Number) (City) (State) (Zip Code)

**Email Address:**

**Phone Number:**

**Social Security Number:**

**Father's Full name:**

**Father's Address:**   
(House number and Street) (City) (State) (Zip)

**Father's Occupation and Employer:**

**Mother's Full name:**

**Mother's Address:**   
(House number and Street) (City) (State) (Zip)

**Mother's Occupation and Employer:**

**Total Number of Dependents Your Parents Support:**

**Your Parent's Dependents, Ages and Relationship to you:**

**What is the approximate amount your parents will contribute annually?**

**Are you married?**

**Spouse's Name:**

**Spouses Occupation and Employer:**

**Do you have Children?**

**Ages:**

**Do you have any other dependents?**

**Ages and Relationships:**

**High School you attended:**

**Address:**

**Date of graduation:**

**For what calling or profession are you preparing yourself?**

**What college or seminary do you attend?**

**Have you applied for admission?**

**Have you been Accepted?**

**If you are currently attending a college or seminary, what is your major course of study?**

**When do you expect to complete this course of study?**

**Please attach a transcript of your grades to date.**

**In the space below, or in a separate document, briefly describe any activities in which you have participated which you fell would be of interest to the Committee. You may include home, school, church or community projects. Also include information relevant to you needs for financial aid in order to continue you education. Briefly describe you goals in life and plans for attaining these goals.**

List below your proposed annual budget for attending college during the upcoming academic year:

**Expenses:**

Tuition & Fees	
Books and materials	
Room and Board	
Clothing	
Lunches and Travel expenses	
Organized Dues and Assessments	
Personal and Recreational	
Other(Explain Below)	
Total Need	

**Income:**

Personal Savings	
Earnings during Vacation	
Part-time earnings during Academic year	
Aid from parents/Relatives	
Scholarships/Grants (attach)	
Veterns/Social Security Benefits	
Spouse's Income	
Other(Explain Below)	
Total Income	

Do you know of or are you aware of any relatives of yours who currently work for Wells Fargo Bank?

If so, please list their name(s)

**I am not aware of any relatives who currently work for Wells Fargo Bank**

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(Signature of Applicant)