APPLICATION FOR EDUCATION SUPPORT PROFESSIONALS BALTIMORE COUNTY (ESPBC) SCHOLARSHIP

APPLICANT

Name	
Address	Zip Code
Phone	Social Security (last 4 digits)

ESPBC MEMBER

Name	School/Office
Address	Zip Code
Phone	Relationship to Applicant
Membership Status ☐ Active ☐ Retired	# of Years as member

FINANCIAL INFORMATION

Applicant	Employed ☐ Yes ☐ No	
	Married ☐ Yes ☐ No	
Employer		
Employer Address		Zip Code
Income	Weekly:	Yearly:

LEGAL GUARDIAN/SPOUSE

#1 Employer		
Employer Address		Zip Code
Income	Weekly:	Yearly:

#2 Employer		
Employer Address		Zip Code
Income	Weekly:	Yearly:

OTHER SOURCES OF INCOME (Please list)

Revised on: 5/31/2026

EDUCATIONAL INFORMATION

Status: High School Senior ☐
College – Freshman ☐ Sophomore ☐ Junior ☐ Senior ☐

Currently Attending: _____

College Major: (attended or current) _____

ESPBC Member Signature: _____ **Date:** _____

Applicant Signature: _____ **Date:** _____

Please submit the completed application, along with the following required documents, to the ESPBC Office no later than March 31, 2026:

- One (1) formal letter expressing your interest in the scholarship
- Two (2) character reference letters
- Three (3) academic reference letters

In addition, please request that the high school or college you currently attend send an **OFFICIAL** transcript directly to the ESPBC Office by March 31, 2026, at the following address:

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