Scholarship Application

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Applicant Name |  |  | |  | |
|  | First | Middle | | Last | |
|  |  |  | |  | |
| Birthdate |  | | | | |
|  |  | | | | |
| Address |  |  |  | |  |
|  | No. & Street | City | State | | Zip |
|  |  | | | | |
| Phone # |  | | | | |
|  | | | | | |
| Email Address |  | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Parent or Guardian(s) | |  | | | |
|  | | First | | Second | |
| Siblings | | | | | |
|  | First | | Second | | Third |
| Name |  | |  | |  |
| Age |  | |  | |  |
| Attends College |  | |  | |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Character References (3) | | | |
|  | First | Second | Third |
| Name |  |  |  |
| Phone # |  |  |  |
| Email Address |  |  |  |

|  |  |  |
| --- | --- | --- |
| Current High School |  | |
|  | Name | Location |

|  |  |  |  |
| --- | --- | --- | --- |
| Faculty References (3) | | | |
|  | First | Second | Third |
| Name |  |  |  |
| Phone # |  |  |  |
| Email Address |  |  |  |

|  |  |  |
| --- | --- | --- |
| High School Information | | |
|  | | |
| List of Activities and offices held | Officer | Year |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  | (Fr) (So) (Jr) (Sr) |

|  |  |
| --- | --- |
| List of Awards or Honors Received | Year |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  | (Fr) (So) (Jr) (Sr) |

|  |  |  |  |
| --- | --- | --- | --- |
| Work History | | | |
| Company | Position | Hours/Week | Duration |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |  |
| --- | --- |
| What is the largest obstacle you’ve overcome? |  |
|  | |
|  | |
|  | |
|  | |
|  | |
|  | |

|  |  |  |
| --- | --- | --- |
| How Would this Scholarship benefit you? |  | |
|  | | |
|  | | |
|  | | |
|  | | |
|  | | |
| Please describe your financial need. Include any items that adversely affect your ability to meet school expenses. | |  |
|  | | |
|  | | |
|  | | |
|  | | |
|  | | |
|  | | |

|  |  |
| --- | --- |
| Is there any other information about yourself or plans you’d like to share? |  |
|  | |
|  | |
|  | |
|  | |
|  | |
|  | |
|  | |
|  | |
|  | |
|  | |
|  | |
|  | |
|  | |
|  | |
|  | |
|  | |
|  | |
|  | |
|  | |
|  | |
|  | |
|  | |
|  | |
|  | |
|  | |
|  | |
|  | |
|  | |
|  | |
|  | |
|  | |
|  | |
|  | |
|  | |
|  | |
|  | |
|  | |
|  | |
|  | |