



SCHOLARSHIP APPLICATION FORM

PLEASE TYPE

Date: _____

Total Number in Household: _____

FATHER'S EMPLOYER & OCCUPATION

MOTHER'S EMPLOYER & OCCUPATION

YOUR NAME: _____
LAST FIRST MIDDLE SOCIAL SECURITY NUMBER

ADDRESS: _____
STREET APARTMENT NUMBER

CITY STATE ZIPCODE

TELEPHONE: { _____ } _____
AREA CODE

PARENTS/GUARDIANS NAMES: _____

SECONDARY EDUCATION SCHOOL ATTENDED:

NAME OF SCHOOL: _____

ADDRESS OF SCHOOL: _____

COUNSELOR'S NAME: _____ WORK PHONE: _____

Cumulative Numerical Grade Point Average for each of the following grade levels: (Example: 3.0/4.0)

9th: _____ 10th: _____ 11th: _____

High School G.P.A. (Average the above three numbers and attach High School Transcript.) _____

Class Rank: _____ of _____. (Example: 5 of 500)

TESTS (Attach a copy of SAT/ACT Scores from Testing Center)

SAT _____ SCORE: Math _____ Verbal _____ TOTAL _____ EXAM DATE _____

ACT _____ SCORE: Math _____ Verbal _____ TOTAL _____ EXAM DATE _____

ACADEMIC HONORS AND ACHIEVEMENTS: _____

EXTRACURRICULAR ACTIVITIES: _____

COMMUNITY SERVICE: _____

INTENDED COLLEGE MAJOR: _____

COLLEGES TO WHICH YOU HAVE/WILL APPLY: (LIST ACCORDING TO FIRST, SECOND, THIRD, FOURTH CHOICES.)

1. _____ 3. _____

2. _____ 4. _____

WORK EXPERIENCE FROM TO

COMPANY: _____

DESCRIPTION OF DUTIES: _____

APPLICANT'S SIGNATURE

DATE