



# Scholarship Application

All Scholarship applications must be submitted no later than April 15

## INSTRUCTIONS FOR APPLICATION

1. Only completed applications will be considered. DO NOT LEAVE ANY ITEMS BLANK.
2. Attach a current copy of your high school and/or college transcripts.
3. Two signed letters of recommendation (from non-relatives) must be attached to this application
4. Check box below for Scholarship you are applying for

City \_\_\_\_\_  General

**\*\* PLEASE TYPE OR PRINT LEGIBLY IN BLACK INK \*\***

## APPLICANT DATA

_____	_____	_____	_____
Last Name	First Name	MI	Social Security Number
_____		_____	
Permanent Home Address		Permanent Home Phone Number	
_____	_____	_____	_____
City	State	Zip Code	County
_____			
Mailing address if different than above			
_____	_____	_____	_____
City	State	Zip Code	County
_____		_____	
Date of Birth	Current GPA		

## EDUCATIONAL DATA

_____	_____	_____
High School Attended	Graduation Date	Ranking in Graduating Class (%)
_____		_____
Name of College you plan to attend		Desired Major
_____	_____	
Print Name	Date	
_____		
Signature		