

## **XI ALPHA Sorority Scholarship**

### **Thorntown, Indiana**

**Award:** \$500.00

The scholarship is to be paid to the school of your choice after you enroll. Should you withdraw from the school for any reason during the first year of studies, you shall notify the Western Boone High School Guidance Department. You will need to make arrangements to reimburse Xi Alpha Sorority in the amount of the scholarship so it may be awarded to an alternate recipient.

### **Requirements:**

Eligibility: Western Boone Senior

Deadline: April 06, 2018

Sent to: Guidance Counselor

Include with application: High School Transcript

Statement as to how you plan to pay for your expenses: parents aid, part-time work, personal savings, other.

Write an essay form in 100 words or less why you feel you are deserving of this scholarship.

**PERSONAL INFORMATION**

Applicant Name: \_\_\_\_\_ Phone Number: ( ) \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Name of High School: \_\_\_\_\_

Rank in High School Senior Class: \_\_\_\_\_ Number in Class: \_\_\_\_\_

Grade Point Average: \_\_\_\_\_ SAT: \_\_\_\_\_ ACT: \_\_\_\_\_

(Reading & Math Only)

(Composite)

**PLEASE ATTACH ADDITIONAL SHEETS IF NECESSARY.**

Extra Curricular Activities: \_\_\_\_\_

\_\_\_\_\_

Community Service Activities: \_\_\_\_\_

\_\_\_\_\_

Honors and Awards Received: \_\_\_\_\_

\_\_\_\_\_

Work Experiences: \_\_\_\_\_

\_\_\_\_\_

**COLLEGE INFORMATION**

Name(s) of College You Plan to Attend: \_\_\_\_\_

Degree and College Major if Known: \_\_\_\_\_

Other Scholarships You Have Applied For: \_\_\_\_\_

\_\_\_\_\_

Scholarships You Have Received and Amount They Pay: \_\_\_\_\_

\_\_\_\_\_

**FAMILY INFORMATION**

Names of Parents or Guardians: Father: \_\_\_\_\_

Legal Resident of Boone County?      Yes      No

Mother: \_\_\_\_\_

Legal Resident of Boone County?      Yes      No

Names and Ages of Siblings: \_\_\_\_\_

\_\_\_\_\_

Number of Siblings Attending College Next Year: \_\_\_\_\_

**REFERENCES**

Non-Relative References:

1. Name: \_\_\_\_\_ Phone Number \_\_\_\_\_

Address: \_\_\_\_\_ Time Known: \_\_\_\_\_

2. Name: \_\_\_\_\_ Phone Number \_\_\_\_\_

Address: \_\_\_\_\_ Time Known: \_\_\_\_\_

3. Name: \_\_\_\_\_ Phone Number \_\_\_\_\_

Address: \_\_\_\_\_ Time Known: \_\_\_\_\_