



Scholarship Application

Postmark Deadline no later than March 15th

Applicant Name:	Ph: ()		
Address:	City:	Zip:	
Date of Birth:			
Name of High School:		Town:	
Rank in High School Senior Class:	Number in Class:		
Grade Point Average:	SAT:	ACT:	
For the following attach extra pages as needed			
Extra Curricular Activities:			
Community Service Activities:			
Honors and Awards Received:			
Work Experiences:			
Name(s) of college you plan to attend:			
Degree and Major if known:			
Other scholarships you have applied for:			
Scholarships you have received and amount they pay:			

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Father:	Mother:	
Address:	Address:	
Employment:	Employment:	
Names/Ages of Siblings:		

Please make sure you send the following for your application to be considered:

• Student Application

Name of Parents/Guardians:

- Essay Autobiography
- Goal Statement
- Official Transcript
- (2) Letters of reference from sources other than family with at least one from a teacher
- POSTMARK NO LATER than March 15th

Number of siblings attending college next year:___

Selection committee may contact you by phone or ask for an interview to find out everything they need to know before making their decision.