

Scholarship Application

		Applican	t Information		
Full Name:			Date:		
	Last	First		M.I.	<u> </u>
Address:					
Address.	Street Address				Apartment/Unit #
	City			State	ZIP Code
Phone:			Email		
Please lis	t other Children in you	ur			
Technical School or College you wish to attend					
Probable Future Plan					
Will it be necessary for you to work to help pay for college expensesYesNo					
Including you how many members of your family will be in college					
Have you applied for any other Scholarships if so please list:					
					-
Please list School and Community Activities					
Please add one childhood experience you have from the Festival:					
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Signature:				Date	e: