

SUMMER SCHOOL SCHOLARSHIP APPLICATION FORM

Print legibly.

Name: _____

Last

First

Middle

Address: _____ City: _____

Phone: _____ Date of Birth: _____ Grade: _____

Approximate Family Income (state if monthly or yearly): _____

Numbers of brothers and sisters at home: _____ in college _____

List the classes you are registering for: 1. _____

2. _____

Explain your reason for applying for this scholarship. Describe your plan to attend school every day this summer.

Student Signature

Date

Parent/Guardian Signature

Date