

SECTION 1:

APPLICANT INFORMATION AND SCHOLARSHIP

Please indicate below, the name of the scholarship you are applying for with this application:

- Frerichs Scholarship
- Marcus Scholarship
- H.H. Quimby Scholarship
- Swope Scholarship

Applicant Name: _____

Street Address: _____ Apt./Unit#: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-mail Address: _____

Date of Birth: _____

Parent 1 / Guardian 1

Relationship to Applicant: _____

Name: _____

Address if different than Student:

Street Address: _____ Apt./Unit#: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-mail Address: _____

Parent 2 / Guardian 2

Relationship to Applicant: _____

Name: _____

Address if different than Student:

Street Address: _____ Apt./Unit#: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-mail Address: _____

SECTION 2: APPLICANT EDUCATIONAL BACKGROUND

Please check all that apply:

- My school district is a PSBA member in good standing.
- I am including a joint letter of recommendation from my school board president and district superintendent.
- I am including two letters of recommendation with this application.

School District: _____

High School: _____

Street Address: _____

City: _____ State: _____ Zip: _____

District Contact: _____

Phone: _____ Contact E-mail Address: _____

Graduation Date: _____ Cumulative Class Rank: _____

Cumulative GPA: _____ Total H.S. Class Size: _____

The school-related information provided above is accurate and true to the best of my knowledge.

HS School Counselor Signature: _____ Date: _____

HS School Counselor Printed Name: _____

SECTION 3: EDUCATIONAL PLANS

Please indicate the names of colleges or universities you have applied to and acceptance status:

School and Major:	Acceptance Status		
	Yes	No	Pending
1.			
2.			
3.			
4.			
5.			

SECTION 4:
STUDENT PROFILE

Please list school and community activities, years of participation and leadership positions held.

School Activities	Leadership	Years

Community Activities	Leadership	Years

Awards and Honors	Leadership	Years

Pease sign below indicating that the information provided in this application is accurate and true to the best of your knowledge.

Applicant Signature: _____ Date: _____