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**SCHOLARSHIP APPLICATION** FORM

Name Age Last First Initial

Address Street or PO Box City Zip

Phone Number Social Security No.

County in Which School is Located

Email

(Please use personal, not school email)

Parents or Guardians Address Occupation(s)

PRESENT STATUS AS A STUDENT

I will graduate from

High School

in 20

For my application to be considered, my list of references and Part II of this application form are to be submitted with this application. Please include a recent snapshot or school photo if available.

1. What college or university do you plan to attend? \_
2. In what field do you plan to study?
3. List of three references, one of which must be either your counselor or high school principal

Name: Address:

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Name: Address:

0ccupation:

Name: Address:

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**SCHOLARSHIP APPLICATION FORM PART II**

Selection will be determined by a committee using the following criteria.

1. All school activities/awards/recognition/leadership.
2. Non-school activities/awards/recognition/leadership.
3. Grade Point Average for seven semesters-Please attach transcript.
4. **Work** Experience
5. Please attach a short essay (200 words) regarding your financial needs and career and educational goals.

Applications must be returned by February 1 to be considered for this scholarship. If you have questions or need additional information please feel free to email petehenryfoundation@gmail.com. Please send completed application to the following address.

Pete Henry Foundation PO Box 504

Colby, KS 67701-0504

Applicant, Sign in Longhand

ITEMS TO INCLUDE:

\_Application (both pages)

\_Transcript

\_Essay

\_Resume (1 page)

Date