

S-D-A Local Scholarship Application

Demographic Information Form:

Scholarship Applying For: _____

Your Name: _____

Age: _____

Address: _____

Phone #: _____

Class Rank: _____ of _____ Grade Point Average: _____ ACT Score: _____

Career Information:

What College do you plan to attend? _____

Have you been accepted? _____

What field of study are you planning to pursue? _____

What are your career goals? _____

List below (or on a separate page) any High School Honors you have earned and the year earned:

List below (or on a separate page) your High School activities and the years you participated:

List below (or on a separate page) your Community/ Church activities during your 4 yrs of HS:

(Student's Signature)

(Parent/Guardian Signature)