



### Hall of Fame Scholarship Application Form

Name: \_\_\_\_\_ Email Address: \_\_\_\_\_  
(Last) (First) (MI)

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Birthdate: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
(Month/Date/Year)

Post Secondary School you plan to attend: \_\_\_\_\_

Have you applied to a post secondary school? Y N Have you been accepted? Y N

Anticipated major or course of study \_\_\_\_\_

Father's Name: \_\_\_\_\_ Mother's Name: \_\_\_\_\_

Father's Occupation and place of employment \_\_\_\_\_

Mother's Occupation and place of employment \_\_\_\_\_

Total Annual Income: Father: \$ \_\_\_\_\_ Mother: \$ \_\_\_\_\_

Name, age and relationship of others who live in your home, if any

Names of immediate family members who are attending college and where they attend

List the name and amount of any financial awards/scholarships/gifts for which you have notified of receiving.

Applicants should attach a one page narrative resume which addresses the **information listed in Step One of the Selection Process**. Please not any special circumstances on the back of sheet that should be brought to the attention of the Board of Directors.

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

Nominator's Signature \_\_\_\_\_ Date \_\_\_\_\_

Nominator's Printed Name \_\_\_\_\_

Class Rank: \_\_\_\_\_ / \_\_\_\_\_ GPA: \_\_\_\_\_ / \_\_\_\_\_

SAT: Verbal \_\_\_\_\_ Math \_\_\_\_\_ Writing \_\_\_\_\_ Total \_\_\_\_\_ ACT Comp \_\_\_\_\_

Counselor's Name: \_\_\_\_\_

Counselor's Signature: \_\_\_\_\_ Date \_\_\_\_\_