North Marion High School Joseph Brock Science Scholarship Application

Please type or print your answers. If application is illegible it will be returned to you.

1. Last Name:	Fi	rst Name:	
2. Mailing Address: Street:			
City:		State:Zip	
3. Date of Birth: Month:	Day:	Year:	
4. I will be attending the following scho	ool in the fall: (Proof of	acceptance is required)	
5. In the fall I will be majoring in:			
6. Grade Point Average (GPA):	(on a 4.	0 scale). Attach a copy of your officia	ıl transcript.
7. ACT score: or	SAT score:	(attach a copy)	
8. List all AP classes you have complete	d:		
Comments:		or harryway od Dominal	

9. What are your educational goals and professional objectives?
10. List you academic honors, awards, and membership activities while in high school: (you can attach your
resume if it has this information).
11. List your community service activities, hobbies, outside interests, and extracurricular activities: (you can attach your resume if it has this information).
12. Essay: In a maximum of 3 pages please answer the following questions:
 What is your field of study? Why did you choose your field of study?
 How do you define science? How will you use your chosen field of study to advance science in our world?
Application must be returned to the guidance office by May 4th