SOUTHLAND HIGH SCHOOL LOCAL SCHOLARSHIP APPLICATION 2021-2022

DATA: IMPORTANT - This application must be submitted in complete form by the applicant to the office of the High School Counselor on or before April 6th current school year.

NAME OF SCHOLARSHIP:

PERSONAL:	
1. Name:	
2. Address:	
3. Name of Parents or Guardian:	
(a)	
(b)	
4. Occupation of Parents or Guardian:	
(a) (father)	
(b) (mother)	
5. Number in family household:	
6. Number in family household who v	vill be in college (including yourself):
COLLEGE AND VOCATIONAL:	
Name of College or Vocational School yo	u plan to attend:
Degree you plan to pursue:	
Do you plan to work while attending colle	ege?
Financial considerations which may need	to be noted for continuing your education:
ACADEMIC: Southland School author	
1. Rank in class	2. Number in class

3. Official transcript of	Shigh school credits, GPA, and test data is attached.
which I have applied and v recipient. Also, I authorize	the stipulations and purposes of the scholarships and/or awards for will try to fulfill these to the best of my ability if I am chosen as a es Southland School District No. C-9 to release such transcripts and any to complete this application.
Date	Signature of Applicant
STUDENT MUST ATTACH A LIST OF ACTIVITIES, HONORS, AND COMMUNITY SERVICE DURING GRADES 9-12.	