

Carter Howard Memorial Scholarship

Please type or neatly print your answers.	
1.	Last Name: _____ First Name: _____
2.	Mailing Address Street: _____ City: _____ State: _____ Zip: _____
3.	Daytime Telephone Number: () _____ Email Address: _____
4.	Date of Birth: Month Day Year Gender: _____
5.	Cumulative Grade Point Average (GPA): _____ (On a 4.0 scale)
6.	Are you the first person in your family to go to college: YES ___ NO ___
7.	Name and location of High School attending: _____
8.	A. List any academic honors, awards and membership activities while in high school: B. List your hobbies, outside interests, extracurricular activities and school related volunteer activities: C. List your non-school sponsored volunteer activities in the community:
9.	A. If you have decided on what college or trade school you will attend, please list school name: B. If not, list your top 3 college choices:
10.	<p>On a separate sheet please write an essay (150 - 500 words) answering the questions below:</p> <p>Describe how you would help friend or any person that is struggling with depression or suicidal thoughts</p> <p>Send application to:</p> <p>Carter Howard Memorial Scholarship 3124 O Ave Morning Sun, IA 52640</p> <p>Due Date: April 30th</p> <p>Amount of scholarships may vary from \$200.00 to \$1000.00, to be given after proof of completion, of your first semester of college</p>