

Indian Hill Trading Post Scholarship

Student Information:

First Name: _____ Last Name: _____

Date of Birth: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____

College/University you plan to attend: _____

College/University City: _____ State: _____

Description of public service activities performed during high school (grades 9-12):

Briefly describe public service activities performed in senior year with the approximate number of hours beside each service.

Certification of Senior year community service:

I certify that _____ served with (name of organization)
_____ as part of his/her community service during the 2017/2018
school year.

Organization Advisor or Representative _____

Advisor or Representative Signature: _____

Date: _____ Phone: _____

DEADLINE: MAY 1
RETURN APPLICATION TO GUIDANCE OFFICE

