

PCHS Endowment Higher Education Scholarship Application

Applicant's Full Name _____

Date of Birth _____ Social Security Number (SSN) _____

Address _____ Town _____ Zip _____

Phone _____

Father's Name _____

Father's Occupation _____

Mother's Name _____

Mother's Occupation _____

GPA _____ Class Rank _____ of _____

Post-Secondary School (planning to attend) _____

Major Area of Study _____ Minor _____

High School Activities:

Offices Held:

Honors and Awards:

Volunteer Experience:

Out of School Activities (home, civic, church youth groups, etc.):

Career Goals and Future Plans:

This award would help me by:

Other information you may want to share:

Please note: Additional pages may be used to further add to your answers. Do not allow yourself to be limited by the space above. Remember to include a copy of your official transcripts to complete your application.

Please email your completed application to kglisson@pchs.dl.k12.mt.us by May 1st.
