



# Troy High School Scholarship Application Form

(Due in the Guidance Office no later than March 20<sup>th</sup>, 2017)

Office use only

## **Part I: Applicant Information – To be completed by student (Please type or print)**

1. Name: \_\_\_\_\_  
Last First Middle

2. Permanent Address: \_\_\_\_\_  
Street City State Zip

3. Date of Birth: \_\_\_\_\_ 4. Sex:  M  F

5. Please check if you are currently a member of:  
 Astra  Interact  Key Club  Math Club  Science Club  
 Other Please write in the name of the club \_\_\_\_\_

6. What Troy elementary school did you attend the longest? \_\_\_\_\_ How many years? \_\_\_\_\_

7. Have you ever participated in Troy Junior Baseball?  Yes

8a. Are you a member of the Boy Scouts  Yes Are you an Eagle Scout?  Yes  
b. Are you a member of the Girl Scouts  Yes Have you achieved the Gold Award?  Yes

9. List your extracurricular activities in high school: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. List your activities in the community (church, scouts, volunteer work, employment, etc.)  
\_\_\_\_\_  
\_\_\_\_\_

## **Part II: Family Information:**

12. Father: \_\_\_\_\_ 13. Mother: \_\_\_\_\_

14. Size of family at home including: Brothers \_\_\_\_\_ Sisters \_\_\_\_\_ Other \_\_\_\_\_ TOTAL \_\_\_\_\_

15. Number of brothers or sisters now in college or technical school: \_\_\_\_\_

## **Part III: Academic Information:**

16. Institutions where the applicant has applied. **Check the school you most likely will be attending.**

<u>Institution</u>	<u>Accepted?</u>
_____	<input type="checkbox"/> Yes <input type="checkbox"/> Pending <input type="checkbox"/> Attending
_____	<input type="checkbox"/> Yes <input type="checkbox"/> Pending <input type="checkbox"/> Attending

17. Major field of study (if known): \_\_\_\_\_



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## **Part IV: Essays**

21. Why do you feel that you should be considered for a scholarship? **(10 pt to 12 pt font only)**

22. Write a brief autobiographical sketch in which you include some significant events that have shaped your life - who you are and what you hope to become. **(10pt to 12pt font only)**

# TROY HIGH SCHOOL

Activities Form

Due March 20<sup>th</sup>, 2017

1. Please type or print using blue or black ink.
2. Circle the years that you *actively* participated in the activity.
3. You must get the signature of your advisor. If you cannot get your advisor's signature, then have the new advisor for that activity or the old advisor's immediate supervisor sign for the old advisor. (**Example 1:** Your club's old advisor has new job out of the Troy district. Have the club's new advisor sign. **Example 2:** Your coach has moved to a new job. Then have the athletic director sign.) Any other signatures will not be accepted.

**NAME:** \_\_\_\_\_  
Last First Middle

1. Activity: \_\_\_\_\_

Year (circle): 9 10 11 12

Advisor's signature: \_\_\_\_\_

Phone number (only needed for non-THS activities): \_\_\_\_\_

2. Activity: \_\_\_\_\_

Year (circle): 9 10 11 12

Advisor's signature: \_\_\_\_\_

Phone number (only needed for non-THS activities): \_\_\_\_\_

3. Activity: \_\_\_\_\_

Year (circle): 9 10 11 12

Advisor's signature: \_\_\_\_\_

Phone number (only needed for non-THS activities): \_\_\_\_\_

4. Activity: \_\_\_\_\_

Year (circle): 9 10 11 12

Advisor's signature: \_\_\_\_\_

Phone number (only needed for non-THS activities): \_\_\_\_\_

5. Activity: \_\_\_\_\_

Year (circle): 9 10 11 12

Advisor's signature: \_\_\_\_\_

Phone number (only needed for non-THS activities): \_\_\_\_\_

6. Activity: \_\_\_\_\_

Year (circle):    9        10        11        12

Advisor's signature: \_\_\_\_\_

Phone number (only needed for non-THS activities): \_\_\_\_\_

7. Activity: \_\_\_\_\_

Year (circle):    9        10        11        12

Advisor's signature: \_\_\_\_\_

Phone number (only needed for non-THS activities): \_\_\_\_\_

8. Activity: \_\_\_\_\_

Year (circle):    9        10        11        12

Advisor's signature: \_\_\_\_\_

Phone number (only needed for non-THS activities): \_\_\_\_\_

9. Activity: \_\_\_\_\_

Year (circle):    9        10        11        12

Advisor's signature: \_\_\_\_\_

Phone number (only needed for non-THS activities): \_\_\_\_\_

10. Activity: \_\_\_\_\_

Year (circle):    9        10        11        12

Advisor's signature: \_\_\_\_\_

Phone number (only needed for non-THS activities): \_\_\_\_\_

<h2>Work Hours</h2>
Job:
Hours per Week:
Supervisor's Signature:
Supervisor's Phone Number: