

TROY NOON OPTIMISTS SCHOLARSHIP APPLICATION

Please fill in this form as completely and accurately as possible. This information will be kept strictly confidential and will only be used by the individuals responsible for selecting the recipients of the five \$1000 Optimist Scholarships.

PLEASE PRINT OR TYPE

Name: _____ Age: _____ School Name: _____
Last First Middle Expected Graduation Date: _____

Class rank: _____ of _____ Grade Point Average _____ (Confirm with your Guidance Department.)
ACT/SAT test results _____

What institute of higher learning do you plan to attend? _____
What college major/career path do you intend to pursue? _____

Do you have any siblings in college now? _____ If yes, how many? _____
Parent(s) you live with (mother, father, both): _____

Your Phone Number: _____ Your Email: _____
Your Address _____ City _____ State _____ Zip _____

Note: Scholarships will be awarded only to students who live in the 45373 Zip code.

Size of family living in your home: Siblings: _____ Others: _____ Total in home: _____

List your high school extracurricular activities (please use and attach extra pages if necessary):

List your high school awards and honors (please use and attach extra pages if necessary):

List your community activities (church/volunteer work, clubs, scouts, employment, etc.):

Describe how you and/or your parents have been involved with Optimist meetings, activities, or events.

On a separate page, please provide a brief (400 words or less) **handwritten** autobiographical sketch in which you include some of the most significant events that have shaped your life. Share who you are and what you hope to become and do as a result of securing your advanced education

On another separate page, please provide a concise, **handwritten** statement of why you believe you should be considered for this scholarship.

Please return completed form, along with your handwritten statements, to your Guidance Office no later than April 1, 2019.

(Revised January 2018)

