

FREDDIE PRISE P.B.A. LOCAL #9

SCHOLARSHIP AWARD APPLICATION

NAME _____ PHONE NO. _____

ADDRESS _____

HIGH SCHOOL _____

S. A. T. score, if known: _____

Class Rank, if known: _____

Father's name and age _____

Mother's name and age _____

Father or Male Guardian

Mother or Female Guardian

_____ Name _____

_____ Employer _____

_____ Nature of Business _____

_____ Position _____

_____ Years with firm _____

List below all dependents receiving financial support from family:

Name Age Relationship Occupation or grade

List all schools to which you have received acceptance:

_____	_____	_____
_____	_____	_____

Name the college or school you will be attending next year:

What career are you planning?

Why?

Have high school transcript accompany application, and a recommendation from a teacher or guidance counselor.

List all scholarships for which you have applied and amounts received if any:

_____	_____
_____	_____
_____	_____
_____	_____

What work experience (part-time or summer) have you had during the past two years?

Dates of Employment

Name of Firm

Nature of Work

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

IV. Service

Please complete the following or attach a Student Activity Profile

List School Activities:

Activity	Office Held/Award Achieved	Grades/Dates

List Community Activities:

Activity	Office Held/Award Achieved	Grades/Dates

Employment:

Employer	Position/Title	Hours per week	Grades/Dates

Please note: all information must be complete for scholarship consideration.