

CHELSEA GERBITZ MEMORIAL SCHOLARSHIP APPLICATION

Return to Counseling office by March 31

Scholarship Requirements:

Graduating senior or college student who is furthering his or her career through vocational and/or higher education pursuits.

2.0 or higher GPA

Students with fewer alternative scholarship opportunities will be given preference.

Section I. Information to be supplied by applicant.

Name (first, middle, last) _____

Date of Birth _____ Male _____ Female _____

Full Name of Parent or Guardian _____

Permanent Address _____

Telephone _____

What college or vocational school do you plan to attend? _____

Is there a possibility you will receive any other scholarships or grants? _____

Please list all other scholarships, awards or financial aid which you have been granted for the coming school year.

Name of Financial Aid	Value	Has it been granted to you?
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List any school activities you have been involved in.

Please write a summary of what the Chelsea Gerbitz Scholarship means to you and attach to this application.

Signature of Applicant

Section II. Information to be supplied by Counselor

Seventh Semester GPA _____

Date of high school graduation will be _____, _____.

Counselor Signature

Date