John Fetz /John Walsh Memorial Scholarship Application



Please fill out and sign the application and submit it to <u>brian.sheckler@mountainview.gov</u> by August 1, 2023.

Last Name	First Name	МІ	High School		
Birth Date	Email Address	Email Address			
Mailing Address	City	Zip	Phone Number		
Parent or Guardian			Occupation		
Parent or Guardian			Occupation		
Are you a relative of a Mountain View Firefighter? If yes, then whom?			Yes No		

Declared or Intended Major

High School GPA

Please briefly describe your plans for college:

High School Awards	or Communit	y Recognition ,	/ Activities:
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Community Involvement (Scouts, church, volunteer work, service trips, etc.):

Your Past, Present, and Future!

Write a brief statement (700 words or less) of your background, personal goals, and why you merit consideration for this scholarship award. Feel free to include your plan for the future!

Please Sign: