

# NCHSRA Scholarship Application

## To be completed by NCHSRA Student

		Applicant Ir	ofrmation			
Full Name:			Date:			
	Last	First		М.І.		
Address:						
	Street Address				Apartr	nent/Unit #
	City			State	ZIP Co	ode
Phone:		F	mail			
Flione.		L	mail			
		School Inf	ormation			
Current High	n School:					
Address			Niumo	herefyeer	o otton do dO	$\begin{array}{cccccccccccccccccccccccccccccccccccc$
Address:			Num	ber of years	s attended?	
Grade Point	Average (4.0 scale)	Attach yo	our most recent off	<i>icial</i> school	transcript as r	equired proof.
Testing Sco	re 🗌 ACT 🗌 SAT 🔄		Attach an official	copy (scho	ol transcript) a	s required proof.
-						
What specia	alty/major do you plan to continue	e your education	?			
College Atte	ending in Fall 2018:					
Address:				Phone:		
What "year"	will you enter College?	Freshman	Sophom	ore	Junior	Senior
what year	will you enter College?					
What "cateo	ory" will you be entered as?	Full Time Stu	ıdent	Part Time ך	e Student	
		_		_	_	
Will you be l	iving on Campus? Yes	No	If "no", where?			
NEED Please explain your need for the NCHSRA Scholarship.						

#### Additional Information

Name & address(es) of Parent(s) or Legal Guardian(s).

Full Name:					Relation :	
	Last	First		М.І.		
Address:						
	Street Address					Apartment/Unit #
	City				State	ZIP Code
Phone:			Email			
Full Name:	Last	First		М.І.	Relation :	
Address:	Street Address					Apartment/Unit #
	City				State	ZIP Code
Phone:			Email			

#### Qualifications

**EXTRA CURRICULAR ACTIVITIES** Please list school extra-curricular activities in which you have participated. Note leadership roles and dates.

AREA OF STUDY What do you want to study and why?

**ORGANIZATIONS** Please list community organizations such as service, volunteer and religious organizations in which you are now active or have previously been active. Note leadership roles and dates.

RECOGNITIONS Please list important awards and recognitions received. Note date and organization presenting honor,

GOALS What are the short and long term goals for your life?.

FUTURE What are your career plans and what would you like to be doing in 10 years?.

### Background

How many years have you been a member of NCSHRA (include NCJHSRA)?

1	2	3	4	5	6	7

#### Requirements Acknowlegement

The following items must be submitted along with this application in order for the application to be "qualified" for a review of the Scholarship Committee. Incomplete and late applications will NOT be considered. If you can circle YES for all items, please submit your application to. NCHSRA Scholarship Committee, c/o K. Stanley, PO Box 3984, Mooresville, NC 28117.

YES	NO	<b>Two reference forms</b> . Your references will mail these directly to the NCHSRA Scholarship Committee.
YES	NO	<b>Proof of college acceptance or current student enrollment</b> . A letter of college or program acceptance is required for receipt of funds.
YES	NO	Official High School/College Transcript. Photocopies are NOT acceptable.
YES	NO	The above form is <b>COMPLETE</b> .

Signature of Applicant:

Date: