

John Fetz / John Walsh Memorial Scholarship Application



Please write legibly and return this signed form by August 1, 2021

Mail to : John Fetz / John Walsh Memorial Scholarship Committee
PO Box 391177, Mountain View, CA, 94039

Last Name

First Name

MI

High School

Birth Date

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?

Yes

No

If yes, then whom?

Date of College enrollment

Name of College or University

Declared or Intended Major

Please briefly describe your plans for college:

High School Awards or Community Recognition / Activities:

Community Involvement (Scouts, church, volunteer work, service trips, etc.):

Your Past, Present, and Future!

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