

Izaak Walton League of America York Chapter 67 Philip W. Stinger Memorial Scholarship College Student Application

Name of Applicant				M	_ F	
	(first, middl	e, last)				
Address			Phone _			
Data of Divide	(street, city, zip)	Diana of Divide				
Date of Birth	(month, day, year)	Place of Birth		(city, state)		
	(memily day)			(only, oraco)		
SCHOLASTIC INFORMATION:						
High School Attended	d	(name, city, state)				
		(name, city, state)				
College Attending _		(name, city, state)				
Graduation Date		Course of Study				
EXTRA-CURRICULA	AR ACTIVITIES:					
School Organizations	3					
School Athletics						
Hobbies						
Part-Time employment, if any						
Occupation for which you are training						
DEEEDENCES:	Name, Address, Occupation	n .				
REFERENCES.	marrie, Address, Occupatio	וונ				
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IMPORTANT: Please give your assessment of what conservation means to you in 200 words or less on accompanying sheet

FAMILY INFORMATION	N:	
Father's Name & Occu	pation	
Mother's Name & Occu	ipation	
	Applicant's Signature	Date
	ve a transcript of grades from your college. cheduled for an interview.	Please bring your latest report along
	DO NOT WRITE BELOW THIS	LINE
Application Received _	Date Interviewed	
Remarks:		
-		

RETURN TO:

IWLA, York Chapter Number 67 Scholarship Committee 7131 Ironstone Hill Road Dallastown, PA 17313