<u>APPLICATION</u> Charles & Emma Clapp Scholarship

Name			
Last	Fir	rst Middle Initial	
Address	Home Phone		
	Cell Phone		
Email Address			
Parent(s)/Guardian(s) Name	·		
Are you a U.S. Citizen? [] Can you furnish proof? []		e you authorized to work in the U.S. ? [] Yes [] N	
Brothers and/or Sisters enro	lled in post high school	program:	
Tuition Amount for Academ	ic Year: \$	rently attend or plan to attend?	
		olarships you have or will receive:	
Amount	Date	Source	

Amount you and/or your parent(s)/guardian(s) plan to provide\$_____

Please attach a written narrative explaining your post secondary and career goals, as well as your community service and high school activities.

Applicant's Signature	Date
Parent/Guardian's Signature	Date
Parent/Guardian's Signature	Date

Application Deadline: Friday, April 13, 2018