

FREEDOM 2018 SCHOLARSHIP APPLICATION

PAID: \$ _____
CASH | CHECK # _____



APPROVAL _____

READ THIS!

ONLY PARTIAL SCHOLARSHIPS NO GREATER THAN HALF OF THE REGISTRATION AMOUNT (\$42.50) WILL BE AVAILABLE FOR THIS EVENT.* ALL SCHOLARSHIP REQUESTS AND BALANCES MUST BE SUBMITTED **NO LATER THAN JANUARY 14, 2018.**

A COMPLETED REGISTRATION FORM, PROOF OF INSURANCE, AND THE AMOUNT YOU ARE ABLE TO PAY IS DUE WHEN SUBMITTING YOUR SCHOLARSHIP APPLICATION.
ALL FIELDS ARE REQUIRED.

READ THIS!

STUDENT'S NAME:

GRADE: **GENDER:** M F

BIRTH DATE:

ADDRESS:

**STUDENT
CELL PHONE:**

**STUDENT
E-MAIL:**

CAMPUS:
(CIRCLE ONE)

PLANO NORTH ESPAÑOL

**DO YOU HAVE
A JOB?**

YES NO

EMPLOYER:

**FATHER'S
NAME:**

EMPLOYER:

FULL PART TEMP

E-MAIL:

**MOTHER'S
NAME:**

EMPLOYER:

FULL PART TEMP

E-MAIL:

DESCRIBE YOUR NEED FOR A SCHOLARSHIP:

**I CONFIRM THAT THIS INFORMATION
IS ACCURATE AND TRUE:**

STUDENT SIGNATURE

PARENT SIGNATURE

*COMPLETING AN APPLICATION DOES NOT GUARANTEE
FINANCIAL ASSISTANCE. FUNDS WILL BE GRANTED
BASED ON AVAILABILITY OF FUNDS AND QUALIFIED NEEDS.