



PO Box 190 N3567 County Road V Eden, WI 53019 SmithandHatch.com **Phone** 920-477-2424

SCHOLARSHIP APPLICATION

Two \$500 scholarships will be awarded. Graduating seniors are eligible.

PLEASE TYPE OR PRINT CLEARLY.

PERSONAL INFORMATION	
Name:	
Date of Birth: /	
Home Address:	
Telephone:	
Father's Name:	Mother's Name:
TRANSCRIPT	
Please enclose a copy of your high school transcript.	
COLLEGE PLANS	
List the colleges you have applied to:	
Have you declared your major? _Yes _No If yes, please I	ist:
LEADERSHIP ROLES: (On a separate sheet of paper)	
Please provide information regarding the extent of your involved	alvament (vegra), awarda and (ar recognition received and
offices held. Leadership qualities can be demonstrated bo	
REFERENCES:	
Please submit two letters of reference. One letter may be f Please list their names and relationship to you.	rom a teacher. You may not ask a relative as a reference.
Name:	Relationship:

_____Relationship: ___

SCHOLARSHIP APPLICATION

ESSAY (on a separate sheet of paper)

In 100 words or less, explain to us the things in your life you are most thankful for.

AUTHORIZATION FOR RELEASE OF RECORDS

I authorize the release of my student records, including my academic record, grade point average, class rank, test scores, etc. to the Scholarship Committee. Finally, I affirm that the data I have submitted is correct, to the best of my knowledge.

Signature of Applica	nt:			
Signature of Parent	(if minor ch	ild)		
Date Submitted	/	/		

Best wishes to you as prepare for the next chapter in your life.



