

HAMPSHIRE REGIONAL HIGH SCHOOL SCHOLARSHIP APPLICATION

This application is for scholarships awarded by the HRHS Scholarship Committee only. Applicants must complete this form and submit it to the Guidance Office by 2:15 p.m. on Monday, April 5, 2010

Name _____
(First) (M.I.) (Last)

Street Address: _____

Mailing Address: _____
(if different) _____

Name(s) and locations of elementary school(s) attended: _____

Number of years you have attended H.R.H.S. _____

Family Information:

Parent/Guardian Name _____ Occupation _____

Parent/Guardian Name _____ Occupation _____

Number of dependent children in family _____ Ages _____

Number of children/parents/guardians in college _____

Student's Information:

To which colleges have you applied? _____

Where do you think you will attend college next year? _____

Intended Major _____

Career Objective: _____

PLEASE CONTINUE ON BACK

Extracurricular activities in which you have participated at HRHS. (i.e., sports, clubs, community service). Applicants may substitute activity resumes for this portion.

	ACTIVITY	9 th Grade	10 th Grade	11 th Grade	12 th Grade
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

Honors/Awards received for school activities: _____

Organizations or activities outside of HRHS (i.e., jobs, clubs): _____

Honors/Awards received outside of HRHS: _____

* Please attach a typewritten statement no longer than 250 words explaining why you feel you are qualified to receive scholarships or any special circumstances demonstrating financial need.

To the best of my knowledge, the information I have provided is truthful and accurate.

Student signature Date

Parent signature Date

Please return application forms to the guidance office no later than 2:15 on April 5, 2010. Thank you.

Applications received after April 5, 2010 will not be considered.

The above information is strictly confidential. It will only be used by the scholarship committee and then shredded.