

EDWARD WATSON MEMORIAL
SCHOLARSHIP APPLICATION

Please Print

NAME: _____

ADDRESS: _____

TELEPHONE: _____ **DATE OF BIRTH:** _____

FATHER'S NAME: _____ **MOTHER'S NAME:** _____

HIGH SCHOOL _____ **GRADUATION DATE:** _____

CLASS RANK _____ **OF** _____ **GRADE POINT AVERAGE:** _____

COLLEGE YOU PLAN TO ATTEND: _____

MAJOR FIELD(S) OF STUDY _____

PLEASE LIST ANY OTHER COLLEGES WHERE YOU HAVE BEEN ACCEPTED:

NOTE: A HIGH SCHOOL TRANSCRIPT AND SAT/ACT SCORES **MUST** ACCOMPANY THIS APPLICATION.

HONORS AND AWARDS:

HIGH SCHOOL EXTRA-CURRICULAR ACTIVITIES:

LIST ALL VOLUNTEER WORK/COMMUNITY SERVICE:

WORK EXPERIENCE:

SIGNATURE

WRITE A SHORT ESSAY of 100 words or less about your career goal and why you chose it. Attach it to this application.

Submit two letters of recommendation for the scholarship, preferably from a teacher, principal or community member. Do not use generic letters that were written for college admission.