Sidney Pribble PTSO Scholarship Application

***Required***: Students must be enrolled at least half-time in a post-secondary program the fall following their high school commencement

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

 Last First Middle

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Parents (s)/Guardian(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Occupation of Parents(s)/Guardian(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of children 18 years of age and under living at home: \_\_\_\_\_\_\_\_\_\_\_\_\_

Name of College or vocational school you plan to attend: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Area of study you plan to major in: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please attach the following:

1. Transcript that includes ACT.
2. Resume that includes extracurricular, church, community involvement and paid/volunteer work experience.
3. One letter of recommendation: (ex: teacher, counselor, administrator or minister) speaking on character and integrity of applicant
4. Completed essay answering prompt:

Prompt:

Describe how this scholarship will help you “be the best you that you can be” as you begin the next chapter of your life.

Thank you for your interest in the “PTSO Sidney Pribble Memorial Scholarship.”

Best of luck!