

**SAFFORD HIGH SCHOOL
LOCAL SCHOLARSHIP APPLICATION**

NAME:

DATE:

SCHOLARSHIP APPLIED FOR:

CUM GPA UNWEIGHTED WEIGHTED CLASS RANK

Have you received other scholarships or grants to be used for college purposes? If so, please list and the give the amount of each. Yes No

List local scholarships for which you are applying.

List activities you have participated in and honors and awards you have received in school and in the community.

State your aims and goals.

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What college do you plan to attend?

Have you been accepted by this college? Yes No

Are there any special circumstances the scholarship committee should be aware of regarding your financial need? Please explain:

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