

NATHAN GEORGE MEMORIAL SCHOLARSHIP

Student's Name: _____

School Name and Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Age: _____ Sex: _____

Parent / Guardian Name and Address: _____

Parent's Occupation: (Father): _____

(Mother): _____

How many children *Living at Home*? _____ *In College*? _____

Income of Parents:

_____ (Below \$15,000) _____ (\$15,000-\$20,000) _____ (\$20,000-\$25,000)

_____ (\$25,000-\$30,000) _____ (\$30,000-\$35,000) _____ (Above \$35,000)

College or University of Choice: _____

Career Choice: _____

List of High School Activities: _____

Membership in High School Organizations: _____

Academic Honors: _____

Leadership Honors and/or Offices held during High School: _____

Work Experience: (Where & How Long) _____

Size of Graduating Class: _____ Class Ranking: _____ GPA: _____ (scale 4.0 or 5.0)

ACT Score: _____ and / or SAT Score: _____

Other scholarships you have already received: _____

Signature: _____ Date: _____

Additional: On the back of this form, please write a short essay about yourself, your goals, interest, hobbies and future goals – college and after college. Also write why you are applying for this scholarship.

