

Deerfield High School
General Application for Local Scholarships

Name of Scholarship:	
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Student Name:	
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Address:	
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Home Phone:		Cell Phone:	
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e-mail address:	
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Parent/Guardian Name(s):		
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Release of Information

I, the undersigned, hereby authorize Deerfield High School to forward the information on this scholarship application to the selection committee of this scholarship.

Applicant Signature	Date

Parent/Guardian Signature (if under 18 years old)	Date

Scholarship applications are due to the DHS Guidance Office by 3:15 pm Friday, March 25, 2016.

General Information:

Rank in class: of GPA: /4.0

Name and location of college/university/technical school you plan to attend.

Major or course of study:

Number of years needed to complete your program of study:

Estimated cost for one year:

(include tuition, room and board, books and supplies, transportation, incidentals):

Will you be receiving any other scholarships?

Yes

No

If yes, how much money will you receive?

Please explain any personal or financial circumstances you would like to be taken into consider:

NOTE: You may attach another typed sheet of paper if you require more room.

