## Deerfield High School General Application for Local Scholarships

Name of Scholarship:  Student Name:  Address:  Home Phone:  Cell Phone:  e-mail address:  Parent/Guardian Name(s):  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	Name of		
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Parent/Guardian Signature (if under 18 years old)  Date	Parent/Guardian Signatu	ture (if under 18 years old)	Date

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

<b>General Information:</b>			
Rank in class: of	GPA:		/4.0
Name and location of college/university/technical	l school you plan to att	end.	
Major or course of study:			
Number of years needed to complete your progra	m of study:		
Estimated cost for one year:  (include tuition, room and board, books and supp	olies, transportation, in	ncidentals):	
Will you be receiving any other scholarships?	Yes	No	
If yes, how much money will you receive?			
Please explain any personal or financial circumsta	nces you would like to	be taken into consider:	

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

## **Activities/Awards/Achievements**

(You may attach another typed sheet of paper of activities in the event all activities do not fit in allotted space)

List extra-curricular activities that you participated in during your high school education.

Activities	Leadership Positions	Awards/Honors	Year in School
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List **community services** that you participated in during your high school years.

Event	Date	Awards/Honors	Year in School

List work experience that you have had during your high school years.

Employer	Type of Work	Hrs per week	Dates Employed