

CMHS Classified Employees Scholarship Application

3 scholarships will be given for \$300 each.

Student Information:

Full Name: _____

Home Address: _____
Street City Zip Code

Phone: (____) _____ Email: _____

Date of Birth: _____ Age: _____

I am planning to attend _____ to major in _____.
College/University Field of Study

Have you already been accepted (as of the date you submit the application)? Yes No

If not, to what colleges/universities have you applied?

1. _____ Field of Study _____
2. _____ Field of Study _____

Parent/Guardian Information:

Father: _____ Phone: (____) _____

Address: _____
Street City Zip Code

Mother: _____ Phone: (____) _____

Address: _____
Street City Zip Code

Signature of Student _____ Date _____

Signature of Parent _____ Date _____

Please attach a resume and a high school transcript to this application. You will need to hand write (not type) and essay between 50-250 words on why you want to attend college and why you think that you deserve this scholarship.

Please submit all application materials to the counseling office by 2:30 on May 1, 2020.