



ALTRUSA INTERNATIONAL of Marion, IN, Inc. SCHOLARSHIP APPLICATION

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Mother's Address: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Father's Address: \_\_\_\_\_

Number and Age of Siblings: \_\_\_\_\_

High School: \_\_\_\_\_ High School Ranking: \_\_\_ of \_\_\_ Students. GPA: \_\_\_\_\_

**\*\*Please include High School Transcript\*\***

Where do you plan on going to College? \_\_\_\_\_

Career Goal: \_\_\_\_\_ Years required to complete degree: \_\_\_\_\_

Estimate 1 year cost (include Tuition, Room/Board, Living Expense, Books): \_\_\_\_\_

Please list all volunteer activities including where/what and approximate hours per month:

Please list all honors and/or awards you have received including academic, athletic, community:

Please list any employment during the summer and/or school year and indicate where and number of hours per week:

In fewer than 250 words, please describe what Altruism means to you... (Attach on a separate piece of paper)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Must be postmarked by **April 15, 2017**

Return to: Altrusa International, c/o Daphne McMullen, 2472 N 400 E, Marion, IN 46952