



Industrial Druid High School Alumni Association Education Foundation Scholarship Application



Student Information										
First Name			Middle Name				Last Name			
Date of Birth	Age	Gender	Telephone Number			E-mail Address				
Address				City			State	Postal Zip		
Parent Information										
Parent Affiliation With Industrial Druid High School Alumni										
Guardian 1	First Name			Middle Name			Last Name			
Guardian 2	First Name			Middle Name			Last Name			
Address				City			State	Postal Zip		
Relationship To Applicant						Telephone Number				
High School Information										
Name of High School Attending					Graduation Date		GPA			
Address				City			State	Postal Zip		
School Principal				Telephone Number			Fax Number			
Activities										
List school and community activities participated during the previous four years										
Activity				Number of Years		Awards/Honors/Office-Held				
Post Secondary School Information										
Name of Institution			Proposed Major				Expected Graduation Date			
Address				City			State	Postal Zip		
Goals and Aspirations										
Signature						Date				
For Scholarship Committee Use Only										
Application received by			Date Received		Date of Action		Accepted Y/N		Award	