Student's Last Name		 	_
Last 4 Digits of SS	N —		

RAVENS ROOST #35 Scholarship Application

PERSONALINFORMATION

NAME:	ADDRESS:		
CITY:	STATE:		ZIP CODE:
BIRTH DATE:	TELEPHON	IE:	
HIGH SCHOOL: PARENT/GUARDIAN NAME(S)	E-MAIL: ADDRESS (if different than Stude	nt)
PARENTS: (MARK "X" FOR ALL THAT	Both	Father	Mother
APPLY)	Living Married	Deceased Separated	Deceased Divorced
FAMILY INFORMATION NUMBER OF FAMILY MEMBERS	ІЛ НОПСЕНО	ID Brothers	Sisters Other
NUMBER OF FAMILY MEMBERS			
FATHER'S OCCUPATION:			
MOTHER'S OCCUPATION:			
GUARDIAN'S OCCUPATION:			

Student's Last Name	Page 2 of 4		
FINANCIAL INFORMATION			
OID YOU FILE THE Free Applicati	on for Federal Student Aid (FAF	<i>SA)</i> ? (Yes/No) _	
FOTAL HOUSEHOLD INCOME §			
NAME AND ADDRESS OF SOM			
NAME AND ADDRESS OF SCH	OOLS APPLIED TO:		
Name of School	Address (City, State)	Application Submitted? (Yes/No)	Acceptance Received? (Yes/No)*
* Provide a copy of the Letter of	Acceptance		
PROPOSED MAJOR SUBJECT/F	IELD OF STUDY?		<u></u>
WHAT IS YOUR CAREER OBJE	CTIVE?		
SCHOLASTIC and COMMUNI	TY INVOLVEMENT		
LIST SCHOOL-RELATED EXTR leadership position served; provide a Continuat	ACURRICULAR ACTIVITIES	[Identify year(s), nam	e of the activity,

udent's Last Name	Page 3 of 4
dent's Last Name	-
LIST COMMUNITY ACTIVITIES [Identify year(s), na	ame of the activity, leadership position served; provide a
Continuation Page, if necessary]	ame of the activity, leadership position served, provide a
Continuation 1 age, it necessary]	
AWARDS and HONORS	
LIST AWARDS and HONORS received [Identify year	ar(s), name of the award or honor, and explain the achievement
provide a Continuation Page, if necessary]	

Student's Last Name Last 4 Digits of SSN —	Page 4 of 4	
PERSONAL STATEMENT Briefly explain how this scholarship will assist y statement on a separate page.	our academic and career goals. Attach your typed	
I fully understand the Eligibility Criteria and information I have supplied is true and correc		
Signature of Student Applicant	Date	
Signature of Parent or Legal Guardian	Date	
Return Application Package to: shontru@yahoo.com ATTN: Scholarship Committee	 Checklist of Required Documents: Completed and Signed	

All documents must be received by Wednesday May 15th, 2023. A confirmation e-mail will be returned to acknowledge receipt of your application package.