

Cedar Grove PTA

Steven Turner Memorial Scholarship Application

Date: _____

A. Personal Information

Please fill in the information below:

Name: _____

Address: _____

Phone Number: _____

Date of Birth: _____

Elementary School Attended: _____

Dates: _____

Middle School Attended: _____

Dates: _____

High School Attended: _____

Dates: _____

Name and Address of the college/university/trade school you that you are enrolled to attend for the upcoming school year:

Name: _____

Address: _____

Phone Number: _____

May we verify this enrollment? _____

Declared major: _____

B. High School Awards

Please list any awards and recognition that you have received while attending high school.

Award/Recognition	Sponsor	Date

C. Extracurricular Activities

Please list the clubs, groups, organizations, and sports teams in which you participated during high school. Please list the approximate dates during which you participated in these activities.

1. School Sponsored: _____

2. Community Sponsored: _____

3. Work Experience: _____

4. Other: _____

5. Community Service Hours: _____

D. Personal References

Please list three personal references (include phone numbers) that we may contact.

1. _____

2. _____

3. _____

**PLEASE RETURN THIS APPLICATION TO CEDAR GROVE ELEMENTARY SCHOOL BY
FRIDAY, MAY 15, 2015. PLEASE ADDRESS YOUR SUBMISSION TO:
STEVEN TURNER PTA SCHOLARSHIP FUND**