

Scholarship Application

Name:		L#:
Term:	Year:	Class:
□ New Student	Continuin	ng Student (must have teacher recommendation)
Previous Schola	1 • • •	
Please give the reas	on(s) you would like	e to receive a scholarship?
 Take only o Attend 80% 	ne class. or more of the class	ditions if given a scholarship? Yes No s meetings. ge's policies and Student Code of Conduct.
-	e given for a maxim a second scholarship	um of two terms and students must be showing o.
Student Signature:		Date of Application:
Teacher Recommer	ndation (include atten	ndance and progress information)
		Teacher Signature
Office Use		
Scholarship Grante Comments:		Scholarship Denied:
Staff Signature:		Date: