**West Salem Business Association**



**Scholarship Application**

Please return to: WSBA ♦ PO Box 5021 ♦ Salem, OR 97304

Application must be postmarked by May 15, 2020

Applicants must reside in the 97304 zip code and graduate this year. Applications will be rated on the content and neatness of information submitted.

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| Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Last First Middle Initial | | |
| Birthdate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| Street Address(Permanent Residence): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  City State Zip County | | |
| Parent or Guardian’s Name: | | |
| Address (If different than permanent address): | | |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Home Phone Work Phone Msg Phone | | |
| I certify that all information which I have provided on this application is true and complete to the best of my knowledge. If requested, I agree to give proof of the information on this application. I understand the Scholarship Selection Committee will review information provided on this form, and my transcripts. If selected to receive a scholarship, I give my permission for a publicity release.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature of Applicant Date  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature of Parent or Guardian Date | | |
| Are you a graduating high school senior? Yes \_\_\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_\_    High School you will be graduating from: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  City State Zip County | | |
| WSBA Use |
| Code: |

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| Anticipated college graduation date: Month: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  What degree do you expect to earn? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Anticipated fields of study: Major: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Minor:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name and location of college, university, or vocational school you plan to attend?  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name City State |
| Indicate the academic periods you plan to attend: Full Time: \_\_\_\_\_\_\_\_\_\_ Part Time: \_\_\_\_\_\_\_\_\_\_  Fall Term \_\_\_\_\_\_\_\_ Winter Term \_\_\_\_\_\_\_\_ Spring Term \_\_\_\_\_\_\_ Summer Term \_\_\_\_\_\_\_\_ |
| High School GPA \_\_\_\_\_\_\_\_\_ SAT Verbal \_\_\_\_\_\_\_\_\_ SAT Math \_\_\_\_\_\_\_\_\_ ACT Composite \_\_\_\_\_\_\_\_\_  (If SAT or ACT scores are unavailable, please provide PSAT scores.) |
| Attach Additional Sheets As Necessary |
| I. Please list your most significant high school awards and activities, include any college prep or advance placement (AP) classes (please include dates). |
| II. List community involvement and activities (away from school) that you have participated in during the past four years (Please give dates). Explain the value you see in being involved in the community. |

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| III. List your work experience during the past four years. Please include dates and a brief description of duties. |
| IV. What are your short and long range career, and personal goals? Please give dates at which you hope to achieve your goals. |
| V. Describe what you have done to prepare yourself for your future. Please state any special circumstances you may wish to share with the Scholarship Committee. |
| VI. Describe your plans to assist with the cost of your college education, please include any scholarships you’ve been awarded. |
| Transcripts: Enclose a seventh semester high school transcript showing grade point average and aptitude test scores. **(This is not a substitute for the information on your application. All blanks on the application must be complete.)** |

CC 12/04/2018