## Kaiser Foundation Scholarship

Application Form

## **BIOGRAPHICAL DATA**

Full Name	N	faleFemale	
Parent/Guardian Name			*
Address	City	Zip	
Land-line Phone No.	Cell Phone	email	
Year of Graduation	High School Grade Point A	verage	
Name of High School			action .
Other Scholarships Received	Or Anticipated	<del>-</del>	·
<ul><li>the academic year of 2017-20</li><li>B. Please attach a brief sum community, church, etc</li><li>C. Please attach a brief states</li></ul>	e purpose of attending the college 18.  Immary of your activities and we ment which includes your plans from more describing your need for the college purpose.	ork experience. Incl	ude school,
D. Please include letters of known you for a minimum of	character/academic references f three (3) years.	rom three (3) people	e who have
E. Attach school transcrip required.	t for the last seven (7) semeste	rs. Proof of graduat	tion will be
Foundation Selection Commit	d supporting documents are sentee. Please make sure that everythe official grades and transcripts ha	hing is typed or writte	
Applicant's Signature		Date	

This application, with supporting documents, must be submitted to your guidance counselor or high school principal.

If you have any questions please contact your high school guidance counselor or high school principal.