**Campbell County School District**

**2020 General Scholarship Application**

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| **Scholarship Name:** | **Scholarship #:** |

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| **Student’s Name:** | |
| **Address:** | **Phone #:** |
| **Father’s Name:** | **Employer:** |
| **Mother’s Name:** | **Employer:** |
| **College Choices:**  **(list most likely to attend first)** | **City & State** |
| **1.** |  |
| **2.** |  |
| **3.** |  |

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| --- |
| **Major:** |

|  |  |
| --- | --- |
| **Cumulative GPA:** | **ACT Composite Score:** |

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| **Awards, Achievements, Honors, etc.: (attach an additional page if needed)** |

*I acknowledge that I meet the criteria necessary to apply for this scholarship and that all the information I have provided is correct and true.*

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| --- | --- |
| **Student’s Signature** | **Date** |