

**Terry Divine Memorial Scholarship  
Forest Park Scholarship Fund**

STUDENT APPLICATION FORM

**\*\*\*\*IMPORTANT\*\*\*\***

***All references to be mailed or directly delivered to the guidance counselor.***

Social Security Number: \_\_\_\_\_ Date of Application \_\_\_\_\_

Full Name: \_\_\_\_\_  
(First) (Middle) (Last)

Home Address: \_\_\_\_\_

Phone: \_\_\_\_\_

In what extra-curricular activities did you participate? (Include both in-school activities and volunteer activities outside of school):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Did you work during the school year? \_\_\_\_\_ If yes, how many hours/week? \_\_\_\_\_

Name of College or University you plan to attend: \_\_\_\_\_

Have you applied for Admission? \_\_\_\_\_ Have you been accepted? \_\_\_\_\_

Intended field of study: \_\_\_\_\_

Have you applied for other scholarships? \_\_\_\_\_ Have you been granted a scholarship? \_\_\_\_\_

If so, name of scholarship and amount. \_\_\_\_\_

**Please attach a Personal Statement which includes your comments on how your field of study relates to the Education field.**

Signature of Applicant \_\_\_\_\_ Date: \_\_\_\_\_

## PARENT APPLICATION FORM

Name of parent or guardian completing this form: \_\_\_\_\_

Home Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Do you have dependents other than your own family or other extenuating circumstances that should be considered? If yes, please explain:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please note below any statements you may wish to make which will assist the Scholarship Selection Committee in consideration of the applicant:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I hereby certify that the above statements are correct.

Signature of parent or guardian: \_\_\_\_\_ Date: \_\_\_\_\_

### RELEASE OF INFORMATION

I hereby certify that any information needed regarding my scholarship requirements be made available to the Forest Park Scholarship Committee and the Terry Divine Scholarship Selection Committee.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_