ANSONIA ACADEMIC BOOSTER CLUB SCHOLARSHIP APPLICATION

Name of Applicant		Phor	Phone number	
Address		Ema	Email	
		□ 2 year □ 4 year		
Majoring/Minoring	in			
Applicants will be j	udged on the foll	owing: Scholastic Standi	ng/GPA	
		Scholastic Based	Scholastic Based Club Membership/Leadership	
		Academic Honors	s/Awards	
		Completion of Ac	Completion of Advanced Classes	
Scholastic Clubs/L	eadership Roles	(Circle the year of membership and	l list any office held with circled year)	
Art Club	9 10 11 12	Office held 9 10 11 12		
Science Club	9 10 11 12	Office held 910		
Spanish Club	9 10 11 12	Office held 9 10 1		
Student Council	9 10 11 12	Office held 9 10 12		
NHS	9 10 11 12	Office held 9 10 11 1		
NTHS	9 10 11 12	Office held 9 10 11 2		
Class Officer	9 10 11 12	Empowering Darke Co. Youth	9 10 11 12	
Quiz Bowl	9 10 11 12	Big Brother, Big Sister	9 10 11 12	
Drama Club	9 10 11 12	Attended Buckeye State Camp (include dates)		
High School <u>Acade</u> Honors Diploma Others Academic H 		Academic A (circle the earned years		
Please <u>check</u> the	following boxes	s and provide your signature to c	omplete your application.	

□ I will be graduating this spring and plan to attend a two or four year college/university in the fall.

□ I have included my transcripts from Ansonia as well from any college that I took CC+ classes.

□ I have included a <u>covering letter</u> about me and explaining my future plans.

□ I understand that payment of this scholarship will be paid directly to the student after submitting their fall schedule from an accredited college/university to the Ansonia Academic Boosters Club by Dec. 31.

Signature of Applicant:_____ Date_____

Application must be submitted to the guidance office by the end of the school day on April 22, 2024 Please neatly print or type above required information. Attach all additional pages. Thanks!