

THE KRISTIN SPURRIER MEMORIAL SCHOLARSHIP APPLICATION

APPLICATION DATE (mm/dd/yyyy): _____

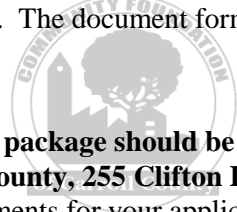
<u>STUDENT</u>	
Name: _____	
Date of Birth: _____	Social Security Number _____
Address: _____	
Phone: _____	Email address _____
Attending: _____ HIGH SCHOOL	
Expected Graduation Date: _____	
Cumulative G.P.A.(Weighted) _____ (Non-Weighted) _____	
SAT scores or other like information _____	

<u>FAMILY INFORMATION (or Guardian if applicable)</u>	
<u>Mother</u>	<u>Father</u>
Names: _____	_____
Address(es): _____	_____
_____	_____
Occupation: _____	_____
Income: _____	_____
Number of Children in Family and Ages: _____	

<u>EDUCATIONAL INSTITUTION</u>
Accepted by _____
(Name of Institution)

(Location)

1. Please attach your unofficial transcript to this application. Please write scores in spaces provided; not, "see attached".
2. Please list your activities at your high school, community (including service clubs or projects), sports, civic groups and church activities in which you have taken part.
3. Please attach a Letter of Recommendation from a teacher, coach.
4. Please attach an essay on a topic of your choice. The document format should be typed, double-spaced, and may not exceed 500 words.



**The complete application package should be returned by April 15 to
The Community Foundation of Carroll County, 255 Clifton Blvd. Suite 313, Westminster, MD 21157
Please include all attachments for your application to be considered.
A Scholarship Fund of the Community Foundation of Carroll County, Inc.**