

# ***THE KARL L. HENDRICKSON MEMORIAL SCHOLARSHIP APPLICATION***

APPLICATION DATE (mm/dd/yyyy): \_\_\_\_\_

## STUDENT

Name: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_ Carroll County High School: \_\_\_\_\_

Email: \_\_\_\_\_ Have you applied for FAFSA? \_\_\_\_\_ Please attach a copy

Number of Years Attended School: \_\_\_\_\_

Carroll County High School Student Since: \_\_\_\_\_ Expected Graduation Date: \_\_\_\_\_

Cumulative G.P.A.(Weighted) \_\_\_\_\_ SAT Score (s) (list math & verbal scores) \_\_\_\_\_

Have you been employed during the summer months or after school? Where? What positions?  
\_\_\_\_\_

## FAMILY INFORMATION (or Guardian if applicable)

	<u>Mother</u>		<u>Father</u>
Names:	_____	_____	_____
Address(es):	_____	_____	_____
Occupation:	_____	_____	_____
Total Income:	_____	_____	_____
Number of Children in Family and Ages:	_____		

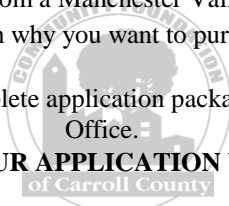
## EDUCATIONAL INSTITUTION

Accepted by \_\_\_\_\_  
(Name of Institution)  
\_\_\_\_\_  
(Location)

1. Please attach your unofficial transcript along with SAT scores to this application.
2. Please list high school activities in which you participated, including service clubs or projects, civic groups and church activities in which you have taken part.
3. Please attach a Letter of Recommendation from a Manchester Valley High School teacher.
4. Please attach an essay (500 words or less) on why you want to pursue the chosen career.

In order to allow time for application review, the complete application package should be **returned by April 15** to the Guidance Office.

**PLEASE INCLUDE ALL ATTACHMENTS OR YOUR APPLICATION WILL NOT BE CONSIDERED.**



A Scholarship Fund of the Community Foundation of Carroll County, Inc.

