

SOROPTIMIST CLUB OF PRINEVILLE

**This scholarship will be granted to one Crook County High School
graduating senior who is seeking to further his or her education.**

Name of applicant: _____

Home address: _____

If you have selected a major field of study, please indicate: _____

What College or University do you plan to attend: _____

Have you received any grants, loans or scholarships? _____

**FAMILY INFORMATION: (If you have a step-parent or guardian, please indicate
and give information requested.)**

Father's name: _____ Occupation: _____

Home address: _____ Employer: _____

Mother's name: _____ Occupation: _____

Home address: _____ Employer: _____

How many children are in your family other than yourself? _____

Do you have any brothers or sisters in college? If so, how many? _____

Telephone number: _____

DEADLINE IS JANUARY 15th

Please attach a copy of your high school transcripts and return
to the Aspire office. Do not attach a photograph.

**A. WHAT HIGH SCHOOL ACTIVITIES HAVE YOU BEEN INVOLVED IN
AND WHAT AWARDS HAVE YOU RECEIVED?**

B. PLEASE LIST YOUR COMMUNITY INVOLVEMENT:

C. WHAT WORK EXPERIENCE HAVE YOU HAD?

D. HOW DO YOU PLAN TO FINANCE YOUR COLLEGE EDUCATION?

E. WHAT CAREER ARE YOU PLANNING FOR AND WHAT STEPS WILL YOU TAKE TO ACCOMPLISH THIS GOAL?