

**EAGLE ROCK HIGH SCHOOL
LOCAL SCHOLARSHIP APPLICATION**
View Scholarship Pamphlet Online at www.erhs.la
DEADLINE MAY 19, 2011 – NO EXCEPTIONS!

Please type or print clearly.

APPLICANT DATA

Mr. _____
Ms. Name (Last) (First) (Middle Initial) (Social Security Number)

Permanent Address (Street) (City) (State) (Zip Code)

Date of Birth () Telephone Number

Name(s) of Parent(s)/Guardian(s)

COLLEGE/UNIVERSITY DATA

Name of post-secondary school for which applicant's scholarship is requested

Address (Street) (City) (State) (Zip Code)

Student will: Live on campus Live off campus Commute from parents' home

Enrolled: Full time Part time Anticipated date of graduation from post-secondary program: _____

Major field of study applicant intends to pursue _____

SCHOLARSHIPS FOR WHICH YOU ARE APPLYING

Please read the requirements carefully and make certain you qualify for consideration.

PERSONAL DATA

Describe your work (employment) experience during the last four years. Indicate dates of employment in each job and the approximate number of hours worked each week. List total amounts earned at each job.

Position	Date From	Date To	Hours/Week	Amount Earned

APPLICANT'S NAME _____

List all school activities in which you have participated during the past four years (*e.g.*, student government, music, sports, etc.). List all community activities in which you have participated without pay during the past four years (*e.g.*, Red Cross, church work, volunteer work). Indicate all special awards and honors.

Activity	No. of Years	Special Awards/Honors	Activity	No. of Years	Special Awards/Honors

What are your plans as they relate to your educational and career objectives, and future goals? You may attach a separate statement if the space below is not sufficient.

Please describe how and when any unusual family or personal circumstances have affected your achievement in school, work experience, or your participation in school and community activities. You may attach a separate statement if the space below is not sufficient.

CERTIFICATION

By submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge, and I acknowledge that falsification of any information may result in revocation of any scholarship awarded.

Applicant's Signature

Date