NEW SQUARE SCHOLARSHIPS APPLICATION

PERSONAL INFORMATION

Please **type** or **print** your answers. If application is illegible it will be returned to you.					
1.	MALL NAME AND LOCATION:	FIRST NAME: LAST NAME:			
2.	Mailing Address: City: State: ZIP:				
3.	Daytime Telephone Number:				
4.	Date of Birth: Month: Day: Year:				
5	Grade Point Average (GPA): (On a 4.0 scale)				
6	Name(s) & address of parent(s) or legal guardian(s): Street/Box: City: State: ZIP: Home phone of parents or legal guardians:				
7	Name and city of high school attended:	Year will graduate/ graduated:			
8	List the name of any college you have attended. (If you have not attended college yet, go to question 11.	Year Began	Year Ended	Year Graduated (If applicable)	Type of Degree Received (If applicable)
	A.				
	B.				
9	What is your intended major in college?				

10	List your community service activities, hobbies, outside interests, and extracurricular activities: Hobbies: Outside Interest:

STATEMENT OF ACCURACY

I hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge.

Signature of scholarship applicant: Date: