

PERSONAL INFORMATION

Name		HIGH SCHOOL	
(Last)	(First)		
Address			
(Street Number)		(City)	(Zip Code)
Phone ()	_E-mail:		
PLANS FOR AFTER HIGH SCHOOL:			
COLLEGE/VOCATIONAL INF	ORMATION		
Career Goal:			
STUDENT EMPLOYMENT:			
Are you working now? Yes	No		
	plans to achieve the	you explain your background (including of ese goals and any other pertinent information ity service.	

NO MORE THAN TWO PAGES, TYPED, 12 PT, DOUBLE SPACED with NAME AND DATE.

Email completed application to WVWC Scholarship Chairperson, sharona.altman@icloud.com

<u>CHECKLIST – Be sure to include with application:</u>

A COPY OF <u>YOUR ESSAY</u>

TWO LETTERS OF RECOMMENDATION FROM A RECENT TEACHER, COUNSELOR, GLC OR DEAN, emailed from a school email to sharona.altman@icloud.com

A RECENT PHOTO

COPY OF YOUR ACCEPTANCE LETTER

STUDENT SIGNATURE: DATE

Deadline: April 16, 2021