

**SCOTTY TURNER MEMORIAL FOUNDATION
SCHOLARSHIP APPLICATION**

(Please Type or Print)

Date: _____

Mr.

Name: Ms.

Mrs. Last First Middle _____

Home Address: _____
Street Number, FRD or Box City State Zip

Phone: (_____) _____ Email _____

Birth date: _____ Student ID or SSN _____

Parents Name: _____

Parents Address: City _____ State _____ Zip _____ Phone (____) _____

Are you married? ____ Yes ____ No Number of legal dependents other than spouse: _____

Your family's household income (Check ONE): _____ Less than \$25,000 _____ \$26,000 - \$40,000
_____ \$40,000 - \$60,000 _____ Over - \$60,000

Number of brothers and sisters in your family (excluding yourself): _____ Number currently in college: _____

What college(s) are they attending? _____

Did/do you have an outside job while attending high school/college (including summers)? ____ Yes ____ No

IF YES: ____ Part-time ____ Full-time ____ Summer Only Number of hours per week: _____

Did you have to work to support or assist your family? ____ Yes ____ No

Any comments or special hardships? _____

Have you been awarded any other scholarships? ____ Yes ____ No If so, How much _____

What school do you plan to attend if the Scholarship? _____

Approximate date of registration: _____

Please indicate your current classification in your undergraduate course of study _____

What degree are you pursuing? _____

What career choices are you considering: 1st choice _____

2nd choice _____ 3rd choice _____

What are your hobbies? _____

Personal Essay: On an additional sheet of paper write a brief essay stating what “Hard Work” means to you and about the person in your life who has taught you the most about what it means to be a “Hard Worker”. Please limit the essay to one type-written page, double spaced.

Attach a certified copy of your current transcript.