

2024 GEMINI SCHOLARSHIP APPLICATION

Please note: Incomplete applications may not be considered for this scholarship.

Name:					
Mailin	g Address	S:			
Phone,	/Email Ad	ddress:			
1.	university you plan to attend:				
	Have you been accepted?				
	☐ Four-	year scholarship Graduate School			
2.	Your de	esired course of study:			
•	What degree do you wish to earn?:				
•	What is your most recent G.P.A.? (either high school or university):				
3.	High Sc	chool you attended:			
4.	List any	y clubs or activities you have belonged to or participated in school or in your community:			
	•	List any offices held, and awards or special recognition received while in these clubs or activities.			
	•	Did you participate in any extra-curricular activities (i.e., sports, band, etc.)? If yes, what were they and di you receive any awards or special recognition?			

•	Work experience (including any volunteer work):
Briefly	describe a personal highlight of the past four years of school:
What w	vould you like to be doing ten years from now?
What w	vould you like to be doing ten years from now?
What w	vould you like to be doing ten years from now?

		Less than \$50,000	
		\$50,000 - \$75,000	
		\$75,000 - \$100,000	
		\$100,000 - \$125,000	
		Greater than \$125,000	
9.	If selected for the Gemini Scholarship, I grant Gemini permission to use my name for print or electronic promotion of the scholarship, including but not limited to, promotional materials, newspaper, and magazine articles, or social media.		
	Applicant Signat	cure	

8. Please indicate below your family gross income from all sources for the 2023 calendar year:

Please attach the following to this application:

- High School Transcript
- College Acceptance Letter
- ACT/SAT Scores

Application packet should be emailed to:

Josie McLellan

josie.mclellan@geminimade.com