



This Scholarship Application is due to the SLHS counseling office by May 3, 2019.

## Show Low Youth Recreation and Sports Foundation 2019 George Slone & Gerry Whipple Memorial Scholarship Application

**Applicants found to have made false or misleading statements will be disqualified from consideration. Applicants found to participate in criminal activity will be disqualified from consideration.**

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City & ZIP: \_\_\_\_\_

Telephone: Home \_\_\_\_\_ Mobile \_\_\_\_\_

Email: \_\_\_\_\_

☐ Male ☐ Female

### **I. Academics – List current GPA and honors/awards**

- 1) **Please submit most recent official transcript.** If submitted by e-mail, the transcript must be sent from your high school counselor's office e-mail address. If submitted by US mail, the transcript must be official and sealed.
- 2) **GPA** \_\_\_\_\_
- 3) **ACT Score:** \_\_\_\_\_ **OR SAT Score:** \_\_\_\_\_  
(Please attach copy of your ACT or SAT score sheet)
- 4) **Please list any academic honors and/or awards, community involvement(volunteer, leadership roles) and school activities (sports, clubs, leadership roles)**

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(Attach additional sheets if necessary)

**II. Education/Career Goals – State your educational interest and goals.**

Education Goals:

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Career Goals:

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**III. Financial Need**

How do you plan to finance your higher education?

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What is your financial need for this scholarship?

Note: This is the amount of your total costs of attendance that is not covered by the expected family contribution or outside grants and scholarships.

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Have you received or do you plan to receive any other scholarships? Please list the scholarship name(s) and amount(s).

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**IV. Other**

Is there any information you would like us to know that we have not asked you about?

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**I, \_\_\_\_\_, have completed this application to the best of my knowledge.**

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature