



SCHOLARSHIP APPLICATION

CHOOSE SCHOLARSHIP FOR APPLICATION:

Applicant may only apply for 1 scholarship opportunity. Please select 1:

Fountain City Classic Community Scholarship

Fountain City Classic Host Committee Scholarship

Place
Headshot Here

APPLICANT INFORMATION:

Full Name _____ Age _____ Date of Birth _____

Name of School _____ City/State of School _____

Grade Level _____ Year of High School Graduation _____ GPA _____ SAT/ACT Score _____

Home Street Address _____

City _____ State _____ Zip _____ Email _____

Leadership and Community Service _____

School and Community Involvement _____

Add any Leadership Position(s) Held _____

HOUSEHOLD DEMOGRAPHIC INFORMATION:

Guardian's Full Name _____

Guardian Relationship (Mother, Father, Grandparent, Other) _____

Guardian's Phone Number _____ Guardian's email _____

Guardian's job title and employer _____

Number of children under 18 in household where you reside (include yourself) _____

Names and ages of children under 18 in the household where you reside _____

Household income _____ Are you a candidate for another type of scholarship? Yes No

If Yes, What type of scholarship? (Academic/Athletic/Community/Other) _____

When are you planning to enter college? _____

Which college are you planning to attend? _____ Have you been accepted? Yes No

PERSONAL REFERENCES INFORMATION: Please include all 3:

TEACHER: Full Name _____

Phone Number _____ email _____

COUNSELOR: Full Name _____

Phone Number _____ email _____

COMMUNITY CONTACT: Full Name _____

Phone Number _____ email _____

SCHOLARSHIP ESSAY QUESTION:

Please attach a 300 word maximum essay answering the question, "Why do I want to attend college?"