## Salvisa Ruritan Club Scholarship Application

(postmark deadline: April 15)

NAME	Date of Birth
Home Address	
Home Phone	_ Cell Phone
E-mail address:	
Name of High School	
Trade School/College/University attending _	W. I. G. I. I. G. I.
ACT Scores (cumulative)	High School GPA
Major Area of Study	
Father's Name	
Occupation	
Mother's Name	
Occupation	
Number of Brothers	Number of Sisters
Clubs/Extra-Curricular Activities:	
Leadership Positions Held:	
Awards/Recognition:	
Work Experience: (include duties/responsib	pilities)
Community/Church Involvement:	

How will you pay for your advanced/college education? (Explain any additional scholarships, parental assistance, work study, financial aid, personal income and work, etc.)

Essay: (500 words or less)		
	beyond high school, how do you plan to use your	
education to benefit your community?		
Essay: (500 words or less)		
	b and what is its importance to the community? Be specific	
	ave had with the Salvisa Ruritan Club.	
ATTACH 1 LETTER (	OF REFERENCE TO THIS APPLICATION.	
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	LICITY PERMISSION FORM:	
I,	do hereby give the Salvisa Ruritan Club permission to ebsite, news articles, and other promotional items/events.	
Parent's Signature (if youth is unde	er 18 years of age)	
*******	************	
NOTE: PLEASE SUBMIT 3	3 COPIES OF ALL SCHOLARSHIP MATERIALS.	
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MAIL APPLICATIONS TO:	OR CONTACT: ELDA JACKSON	
SALVISA RURITAN CLUB	613-2333	
P.O. BOX 3	010 2000	
SALVISA, KY 40372	WWW.SALVISARURITAN.ORG	