

TERESAN SCHOLARSHIP UNDERGRADUATE APPLICATION

APPLICANT: _____
FIRST MAIDEN LAST

ADDRESS: _____
STREET CITY STATE ZIP

HOME PHONE: (____) _____ **CELL PHONE:** (____) _____

DATE OF BIRTH: ____/____/____ **E-MAIL ADDRESS:** _____

HIGH SCHOOL _____ **YEAR/GRAD** _____

COLLEGE / UNIVERSITY YOU PLAN TO ATTEND:

NAME OF INSTITUTION: _____

CITY, STATE: _____

SPONSOR: _____
FIRST MAIDEN LAST

ADDRESS: _____
STREET CITY STATE ZIP

HOME PHONE: (____) _____ **WORK PHONE:** (____) _____ **CST CLASS YEAR:** _____

THE FOLLOWING ITEMS ARE REQUIRED:

- A. COMPLETED **APPLICATION FORM**
- B. COMPLETED **SPONSOR VERIFICATION FORM**
- C. An **Essay** which must include 1) educational goals, 2) financial need, 3) community/volunteer service, 4) work history, and 5) activities (*2-page limit*)
- D. A **Letter of Recommendation** from a teacher, counselor, supervisor, etc. (Must be current, written within 6 months of application.)
- E. **OFFICIAL TRANSCRIPT**
 - **HIGH SCHOOL STUDENTS** NEED TO SEND:
 - FINAL **HIGH SCHOOL TRANSCRIPT** (COMPLETE THROUGH THE END OF SENIOR YEAR)
 - COPY OF YOUR **LETTER OF ACCEPTANCE** FROM THE COLLEGE OF CHOICE
 - **CURRENT COLLEGE STUDENTS** NEED TO SEND:
 - **MOST RECENT COMPLETE COLLEGE TRANSCRIPT** (IF YOU ARE CURRENTLY IN YOUR FIRST SEMESTER, FOLLOW INSTRUCTIONS FOR HIGH SCHOOL STUDENTS)
- F. A NON-REFUNDABLE **CHECK FOR \$25** PAYABLE TO: *TERESAN SCHOLARSHIP FUND*

I WOULD LIKE MY APPLICATION TO BE CONSIDERED FOR THE
JULY 1, 20 ____ or NOVEMBER 1, 20 ____ DEADLINE

**ALL APPLICATION MATERIALS (A-F) MUST BE RECEIVED IN ONE MAILING
PRIOR TO OR ON THE DEADLINE DATE,
OR THE ENTIRE PACKET WILL BE RETURNED TO APPLICANT**