

SCHOLARSHIP APPLICATION

20_-20_ ACADEMIC YEAR

Personal Information			
1.	Last Name:	First Name:	
2.	Mailing Address:		
	City:	State	Zip
3.	Daytime Phone #:	Email:	
4.	DOB:	Gender:	
5.	Cumulative GPA: (on a 4.0 scale)	<i>Attach a proof of GPA (report card or transcripts) covering 3 school years</i>	
6.	Name of High School attending:		
7.	A. List any academic honors, awards and membership activities while in high school: (Use separate sheet if necessary)		
	B. List your hobbies, outside interests, extracurricular activities and school-related volunteer activities: (Use separate sheet if necessary)		
	C. List your non-school sponsored volunteer activities in the community: (Use separate sheet if necessary)		
	D. List your work activities: (Use separate sheet if necessary)		
8.	Community College or Professional Technical School to be attended:		
9.	Have you been accepted to post high school study yet? Add acceptance documentation.		
10.	Field of Study:		

STATEMENT OF ACCURACY FOR APPLICANTS

I hereby affirm that all the information provided by me is true and correct to the best of my knowledge. I also consent that if chosen as a scholarship recipient that my picture may be taken and used to promote the Prodigy Academic Scholarship Program (recipient may waive photo due to unusual or compelling circumstances).

I hereby understand that if chosen as a scholarship recipient, according to Prodigy Academic Scholarship Program policy, it is my responsibility to remit the appropriate information for my scholarship to be paid directly to me for my fall semester 2021 and each subsequent semester for up to 2 years, ending with my summer semester 2023.

I hereby understand that I will not submit this application without all required attachments and supporting information. Incomplete applications or applications that do not meet eligibility criteria will not be considered for this scholarship.

Applicant Signature

Date (MM/DD/YY)

Please email application to scholarship@prodigystoploss.com or mail to:
Prodigy Academic Scholarship Program
P.O. Box 997
Freeland, WA 98249

For Prodigy Academic Scholarship Committee use only:

Checklist:

- | | |
|--|--|
| <input type="checkbox"/> Application and Statement of Accuracy | <input type="checkbox"/> School Report Card/transcript reflecting cumulative GPA |
| <input type="checkbox"/> 1 Letters of Recommendation (1 teacher/counselor and 1 non-related adult) | |