

SELF-REPORTED SCHOLARSHIP FORM

(to be announced at Graduation)

Student Name: _____

THIS FORM IS AN ABSOLUTE NECESSITY IF A SCHOLARSHIP OFFERED TO YOU IS TO BE ANNOUNCED AT GRADUATION!

(List only the ones to be used where you will actually attend)

Please fill in the form as thoroughly as possible and return to the Counseling Office by **MONDAY, MAY 21st**

Name of college student will be attending:

Name of scholarship(s) awarded: (documentation required)

1. _____

2. _____

3. _____

4. _____

5. _____

Parent Signature