



# Shepherd Women's Club

est. 1916

## Scholarship Application

**Due Date:**

April 12, 2022

Shepherd Women's Club has a scholarship opportunity for Shepherd Schools graduating seniors who will be pursuing college/university/trade/vocational education. This scholarship is available to young men or women and the amount varies according to the number of students accepted and the financial assets of the club in the spring of each year.

### APPLICANT INFORMATION

Name

\_\_\_\_\_

Last

\_\_\_\_\_

First

\_\_\_\_\_

Middle

Permanent Address

\_\_\_\_\_

Street

\_\_\_\_\_

City

\_\_\_\_\_

Zip

Date of Birth

\_\_\_\_\_

Gender

\_\_\_\_\_

Telephone Number

\_\_\_\_\_

Home

\_\_\_\_\_

Cell

### FAMILY INFORMATION

Name of parent/guardian

\_\_\_\_\_

\_\_\_\_\_

Address

\_\_\_\_\_

Street

\_\_\_\_\_

City

\_\_\_\_\_

Zip

### SCHOLASTIC INFORMATION

Student of:

Shepherd High School

Odyssey High School

Shepherd Early College

\*\*\* (Include a copy of transcript--see high school counselor) \*\*\*

**School/Community Activities:** List your most important school/community activities during your high school years.

**Work Experience:** List your paid work experience during your high school years.

**Other Scholarships:** Please list any other scholarships you have received or will be receiving to further your education.

**Career Goals:** Attach a short statement regarding your educational plans and how they relate to your career goals. Include acceptance to a college or university.

**Recommendations:** Please attach two letters of recommendation from teachers or personal references who know you well and can attest to your character.

**Certification:** I acknowledge that the information on this application is correct to the best of my knowledge.

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Applicant's Signature

Date

**Permission to Release Information:** Applicant's school is granted permission to supply the Scholarship Committees with school records that may include attendance, general scholastic information, etc.

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Applicant's Signature

Date

-----PLEASE RETURN TO THE COUNSELING OFFICE-----