**Worth County Development Authority Scholarship Application**

**1) Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**2) School district \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**3) Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**4) Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**5) Parent Contact Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**6) Social Security number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**7) Have you resided with your parents/ legal guardians in Worth County throughout school grades 11 and 12? Please sign and have a school administrator sign here if you have.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**8) Where do you plan to go to college? Please attach acceptance letter and address of school. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**9) Are there any special circumstances with this scholarship that the WCDA needs to know about? For example joining the army, etc. Worth county students have up to 4 years after graduation to take advantage of this scholarship.**

***Students must attend the awards ceremony in which the scholarship is given out or the student forfeits this scholarship.***

**Checks will be made directly out to the college you will be attending. Please have proof of registration sent into our office by September 1st of that school year or 2 weeks after the semester starts.**

**This form is due April 15th. NO EXCEPTIONS**

**I, the undersigned, do acknowledge this information to be true and correct and I have read this form completely.**

**I also agree at some point in my life to give back to my community by volunteering for a cause or helping in a positive way.**

**Parent’s signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Student’s signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**