

15th DISTRICT PTA SCHOLARSHIP APPLICATION
DEADLINE: MARCH 27TH, 2010

Section I: **Name (full name):** _____
 Home Address: _____
 Date of Birth: _____
 Home telephone: _____
 Social Security #: _____

Father's name (if living): _____
Address: _____
Occupation: _____
Place of Work: _____

Mother's name (if living): _____
Address: _____
Occupation: _____
Place of Work: _____

PTSA member: **yes** _____ **no** _____ (Student must be a member of the PTSA)

PTSA President's signature _____

(PTSA President – Please verify that student is a PTSA member of the school)

Applicant lives with: **both parents** ____, **father** ____, **mother** ____, **other** ____, (explain below)

Section II: **1. List all adults/children in the home, giving name / age / school, if any:**

2. Estimated net annual income (including child support/ student income, if any):

Father income: _____
Mother income: _____
Other income: _____
Total income: _____

3. Grade point average: _____ (Attach a copy of your transcript)

4. Name of college you plan to attend and address:

5. Has the above college accepted you? **Yes** _____, **No** _____,

6. What field of work do you plan to enter upon graduation from college?
(Explain on another sheet of paper and including other scholarship,
financial aid and/or grants awarded to you with the total dollars amount.)

Section III:

- A. Write a short autobiographical sketch on a separate sheet of paper including the following:**
- 1. Explain why you wish to attend college.**
 - 2. Explain why you need a scholarship.**
 - 3. Explain what you hope to do when you graduate from college.**
- B. Attach three (3) letters of recommendation from your school, church, community leaders, employers, etc...**
- C. One letter of recommendation must be from your current high school principal or senior counselor.**
- D. Attach a recent photograph of yourself.**
(All the above information will be considered personal and confidential)

To the best of my knowledge, all information contained herein is accurate and true.

Applicant signature: _____

Parent/Guardian signature: _____

School Counselor signature: _____

Please return application to:

**15th District PTA
Presley Pham,
Scholarship Coordinator
319 South 15th Street
Louisville, KY 40203
502-435-7270
presleypham@yahoo.com**

All blanks must be complete and materials attached in order for the application to be considered.

DEADLINE: POSTMARKED BY: MARCH 27TH, 2010