

DR. CHARLES A PAUKSTIS SCHOLARSHIP

Application Form

\$500 / 2 Yrs

Eligibility:

1. Graduate of Ludington High School
 2. Must be planning to attend West Shore Community College
 3. Application to W.S.C.C. must already have been sent in or be turned in with scholarship application.
 4. Financial need will be a factor in the selection process.
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Date: _____

1. Personal Data:

Name: _____

Address: _____

Telephone: _____ Birthdate: _____

Father's Name: _____ Mother's Name: _____

Father's Occupation: _____ Mother's Occupation: _____

2. Academic Data:

High School: _____

Dates Attended: _____

Academic Point Average: _____ (based on a 4.0 scale)

3. Service Data:

School service and leadership:

Organizations and Clubs (include offices held):

Community Service (church, clubs, organizations, etc.):

4. Professional or vocational data:

(a) Where do you plan to enroll and apply this scholarship? _____

(b) When do you intend to enroll? _____

(c) Have you been accepted to date? Yes No

(d) Why do you feel you are eligible for this scholarship?
(Answer in terms of school achievement and professional aspiration)

(Attached sheet is acceptable)

5. Financial need may be one of the decision factors in the selection process.
Please explain your financial circumstances.

(Attached sheet is acceptable).