



## RED CROSS SCHOLARSHIP APPLICATION

Student Name \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, and Zip Code \_\_\_\_\_

Telephone (including area code) \_\_\_\_\_

Cell Phone (including area code) \_\_\_\_\_

E-mail Address \_\_\_\_\_

Last four (4) digits of your social security number \_\_\_\_\_

Program Attending at A-Tech \_\_\_\_\_

GPA \_\_\_\_\_ Counselor's Signature \_\_\_\_\_

Discipline Record at A-Tech \_\_\_\_\_ Mr. Stofan's Signature \_\_\_\_\_

Days Absent- Junior year \_\_\_\_\_ Senior year \_\_\_\_\_

Mrs. Hammond's Signature \_\_\_\_\_

Community Service Hours Completed- Junior Year \_\_\_\_\_ Senior Year \_\_\_\_\_

Verified by \_\_\_\_\_

**Name, address, and phone number of the college or institution to which you have been accepted must be included in order for this application to be considered.**

Name of College or Institution \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, and Zip Code \_\_\_\_\_

Telephone Number (including area code) \_\_\_\_\_

Counselor's Signature \_\_\_\_\_ Date \_\_\_\_\_

**A copy of your acceptance letter MUST be attached for your application to be considered.**

One Statement of Reference from an A-Tech Instructor

---

---

---

---

---

---

---

---

---

---

Instructor's Signature \_\_\_\_\_ Date \_\_\_\_\_

Brief statement why you would be a good recipient of this scholarship:

---

---

---

---

---

---

---

---

---

---

**Please return this completed for to Mr. Basen in the Principal's Office by April 26. Only completed applications will be considered.**