PGE - Parents for Gifted & CAPA Education Ruth Harris Scholarship Application

Student Cover Form

RUTH HARRIS BOOK SCHOLARSHIP

2015-2016 Application			
Applicant Name			
Address			
Phone		Email	
GPA ACT Composite Scc	ore Year	s enrolled in Re	enaissance/CAPA
RECOMMENDATIONS List the two persons you have ask a person who is familiar with you information for each reference (forms/letters to this application.	our academic ab school address,	ility and your phone numbe	love of learning. List contact r, and or email). Attach both
Name/Title		Name/Title	
Number/Street		Number/Stre	et
City Stat	e/Zip	City	State/Zip
Phone number or Email		Phone number or Email	
Are you employed part time?YesNo		If yes, how many hours per week?	
Jobs and responsibilities:			
School you plan to attend in acade	emic year 2016-2	2017:	
Intended Area of Study:			
DOCUMENTATION CHECK OFF			
APPLICATION		REFERENCE #1	
ACTIVITY PARAGRAPH(S)		REFERENCE #2	
ESSAY			