



Celebrate Munford, Inc.

P.O. Box 1257 Munford, TN 38058

SCHOLARSHIP APPLICATION

1. Name of Applicant: _____
First Middle Last

2. Mailing Address: _____
Street or PO Box City Zip

3. Permanent Address (if different from above): _____

4. Has the applicant been a resident of Tennessee for at least one year prior the date of application?
() Yes () No

5. Date of Birth: _____ Place of Birth: _____

6. Age: _____ Gender: () Male () Female 7. Contact Number: _____

8. Institution Planning to Attend: _____

9. Enclose with your application the following:

- Copy of high school transcript
- Score of ACT, SAT, or other applicable test scores
- Financial Need Form
- One-page essay stating why you want this scholarship and your plans/ career choice
- List of extra-curricular activities and offices held in each
- Color photo (if selected, photo will be posted on website – head and shoulder shot referred)
- List any and all scholarships and financial aids you will be receiving
- List Celebrate Munford, Inc. participation

10. This is to certify that I have known this student for at least one semester. From this acquaintance and association, I certify that he/she is of good moral character. I further certify that the applicant has shown a definite interest in furthering his/her education and would be deserving of this award.

Principal

Teacher

Teacher

11. I certify that all information contained in this application is correct and current to the best of my knowledge.

Applicant Date Parent/Guardian Date