TENSAS REUNION, INCORPORATED SCHOLARSHIP APPLICATION

Write a brief biographical sketch describing your hobbies, interests and any other activities which brought about an increased desire to further your education.



Parent/Guardian Consent

As the parent/guardian of the applicant, I certify that this applicant has my permission to apply for the Tensas Reunion, Inc. Scholarship and I will be responsible for his/her observing the regulations set forth.

SIGNATURE



TENSAS REUNION, INCORPORATED SCHOLARSHIP APPLICATION

APPLICANT'S NAME:							
(LAST)		(FIRST)			(MIDDLE)		
ADDRESS:							
(STREET)				(CITY)	(IL)	(ZIP)	
SEX: [] SOCIAL SECURITY NUMBER: / /							
PHONE NUMBER: ()							
NAME OF PARENT / GUARDIAN:					PHONE NU	MBER:	
NAME OF RELATIVE ASSOCIATED WITH TENSAS REUNION, INC.:							
		_					
		_					
		-					
HIGH SCHOOL ATTEND:							
GRADE POINT AVG.: [] GF	RADUATI	NG_CLAS	SS SIZE:	[]	CLASS RA	ANK: []	
NAME OF UNIVERSITY/COLLEGE YOU PLAN TO ENROLL:							
NAME OF CAREER YOU PLAN TO PURSUE:							
LIST SIGNIFICANT SCHOOL ACTIVITIES, LEADERSHIP POSITIONS, AND HONOR RECOGNITION. CHECK THE GRADES WHEN THE ACTIVITIES OCCURRED.							
	9TH	10TH	11TH	12TH			
ACTIVITIES				GRADE		LIST LEADERSI	HIP POSITIONS/HONORS

(CONTINUED ON NEXT PAGE)

SUBMISSION

SEND ALL MATERIALS ON OR BEFORE APRIL 30 TO:

MS. DOROTHY MORRISON-BEELER SCHOLARSHIP CHAIRPERSON TENSAS REUNION, INC. 9057 SOUTH COLFAX AVENUE CHICAGO, IL 60617

I HEREBY AFFIRM THAT I HAVE COMPLIED WITH REQUIREMENTS AND WILL ABIDE BY SELECTED REGULATIONS IF I AM CHOSEN.

APPLICANT SIGNATURE

DATE