

Glidden-Ralston Booster Club Scholarship Application

“Where volunteering makes anything possible”

To the Applicant,

You will be judged upon the information you furnish on this application, give considerable thought to what information is being requested, and to the substance of the data you will submit. Provide as much information about your future education and vocational plans. Remember, the members of the Scholarship Selection Committee have only this application by which to judge you. Your essay will be judged **anonymously**. To be considered, your family must be a current paid Glidden-Ralston Booster Club Member and you must be a senior at Glidden-Ralston High School.

Scholarship funds will be distributed at the beginning of the second semester of the recipient’s first year of post-secondary education. Please mail a copy of your first semester transcript to PO Box 47, Glidden, IA 51443. Up to five (5) awards will be presented to Glidden-Ralston seniors on awards night totaling \$1500.

Due Date: April 15

Only applications emailed to grboosterclub@glidden-ralston.k12.ia.us will be accepted for consideration.

Applicant’s Name _____

First

Middle

Last

Applicant’s Address _____

Street

City

State

Zip

Telephone _____

Essay Questions:

1. Write about your future education and vocational plans.
2. Describe your involvement in organizations or activities within your community and beyond your service hour requirements for school. Mention ways in which you may have been of service to your community in general or to people in your community in particular. What have you learned from this experience(s)?