



2024
“Edward W. Mohr” Scholarship
Application

Personal Information (Please print in ink or type)

Name: _____
Address: _____
Phone: _____
E-Mail: _____
Date of Birth: _____

Family History

Father: _____
Name Occupation
Employer

Mother: _____
Name Occupation
Employer

Guardian: _____
Name Occupation
Employer

Parent's/Guardian's Total Income from All Sources for Last Year: _____

Total Number of Dependents Living on this Income: _____

High School Information

School: _____
Address: _____
Date of Graduation: _____ Size of Class: _____
GPA or Percent Average: _____ Class Rank: _____
High School Counselor/Advisor Office Phone#: _____

College Information

Are you currently enrolled in college? ____ No ____ Yes If yes: Completed ____ years/credits

Have you applied for college? ____ Have you been accepted? ____ Pending? ____

Name of College: _____

Address: _____

Type of College: ____ 4-Year ____ 2-Year Attending Full/Part Time: _____

Intended Major: _____

Academic Honors

List all academic honors and awards that you have received. Indicate year dates.

Scholarships / Grants / Loans

List all scholarships, grants, or loans you are seeking or have been awarded

Name/Type	Amount	Granted	Pending
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Community Service Work / Extra-Curricular Activities

List the name of the agency and the total number of hours you have volunteered. Indicate year dates.

List your extra-curricular activities and offices you have held. Indicate the year date.

Work Experience

List work experience for the last four years.

Occupation	Employer	Dates of Employment	Part/Full Time
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Letter of Recommendation

Attach a recommendation letter from a teacher, counselor, professional, or coach attesting to your abilities and qualifications.

Essay

On a separate piece of paper, write an essay of 200-250 words telling your plans and hopes for the near future. Why do you want to continue your education? What are your long-range goals?

Signature

The information on the submitted pages is complete and accurate to the best of my knowledge.

Signature of Applicant

Date

Signature of Parent or Guardian (if Required)

Date