

“Ride for Cindra” Memorial Scholarship

Name _____ Social Security _____
Phone Number _____ Birthdate _____
Address _____
City _____ State _____ Zip _____
High School _____ Graduation Year _____
G.P.A. _____ Major Field of Study _____

On a separate sheet of paper, answer the following questions. Please type.

- List all community and school involvement: leadership, honors, awards, organizations.
- How do you plan to finance your education? Please elaborate.
- What are your educational and career goals, and how do you intend to achieve them?
- What makes you an outstanding scholarship applicant?
- Please describe a circumstance, if any, which may have interfered with your academic performance.

****Transcripts must be submitted with application to be considered.
Return application to the Counselors office by April 1.**