

PACD Auxiliary Scholarship Application

DEADLINE:

This application must be completed and submitted by **June 15** to:

Scholarship/York County Conservation District/118 Pleasant Acres Road/York, PA 17402

APPLICANT:

Name: _____ Soc. Security #: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Telephone #: _____ e-mail: _____

PA College or University: _____

Major Course of Study: _____

Junior Senior Grade Point Average: _____

FINANCIAL STATUS:

I plan to meet education expenses by the following percentages:

Employment _____% Savings _____% Family _____%

Loans _____% Grants _____% Scholarships _____%

Other _____%

FAMILY INFORMATION:

Mother: _____ Occupation: _____

Father: _____ Occupation: _____

Spouse: _____ Occupation: _____

INSTRUCTIONS:

On a separate sheet of paper, please provide any information which might assist the Committee in the evaluation of your application, such as career goals, family responsibilities, education history since high school, your course of study and/or other facts applicable to the criteria.

The amount of scholarship will be \$500 and will be paid to the recipient at the Annual Meeting of the PACD in July of each year.

Date

Signature