

Sting to Sting Scholarship

Name: _____

Address: _____

Phone: _____ Number of people in family: _____

Guardian 1 Name: _____ Relationship: _____

Occupation: _____ Employer: _____

Guardian 2 Name: _____ Relationship: _____

Occupation: _____ Employer: _____

High School: _____ GPA: _____ Class rank: _____ out of _____

Extracurricular Activities: Please list years of involvement for each organization/club and any office held.

Honors and Awards:

Community Service: (Describe your community volunteer work)

Briefly describe yourself and why you should receive this scholarship:

Name of the college or university that you plan on attending _____

Course of study or major you plan to study _____

Financial Need: Indicate your family's adjusted gross income from last year's tax return.

_____ Under \$15,000	_____ \$15,000 - \$25,000	_____ \$25,000 - \$35,000
_____ \$35,000 - \$45,000	_____ \$45,000 - \$55,000	_____ \$55,000 - \$75,000
_____ \$75,000 - \$90,000	_____ \$90,000 - \$125,000	_____ \$125,000+

You may attach a resume or other documents you wish to be considered with the application.

Completed application must be returned to Mrs. Sarno no later than April 30, 2019.