Clearfield High School - Class of '67

General Scholarship Application

School Year: 2019-2020

Date:	Name:			
Address:				
City:		State:	Zip Code: _	
Parents/ Legal G	iuardian:			
Overall GPA:	ACT (Ma	ith Score):	ACT (Composite):	
Have you been a	accepted to a college o	or university (circle o	ne)? YES	NO
What college or	university do you plar	n to attend?		
List names and a	amounts of any grants	or scholarships you	have already received	l?
-	, community service/ ve been involved with	-	•	
List any special ac	chievements, recognition	ns or awards you have	received while attendir	ng high school
Please attach a s	eparate piece of paper are a	with a 100 – 200 word		plaining why you
Please turn in thi	s completed application	n and essay to the Sch	oolarship Counselor by:	4/17/2020
Counselor's Signa	ature	_	Student's Signature	