



WORKINGER SCHOLARSHIP APPLICATION

Please return to Guidance Office by March 24, 2023

Full Name _____

Mailing Address _____

City / Zip _____ Telephone _____

Father's (Guardian's) Name _____

Father's Occupation _____

Mother's (Guardian's) Name _____

Mother's Occupation _____

List Brothers/Sisters _____

What do you plan to study?

Please attach a resume and list any activities, including school activities, in which you have participated. Examples might include church, sports and marching band. List any positions that you held in these organizations and list any awards and honors you have received.

In your own words (250 or less), please share your plans for the future and your hopes and dreams for making a contribution to society. **Please type your essay and attach it to this application.**

I understand that the information on this scholarship application will remain confidential, and the decision of the scholarship selection committee will be final and accepted by me without recourse.

Signed _____ Date _____

Note: In order to receive this scholarship, you MUST be attending the University of Akron