

James B. Plummer Memorial Scholarship

Name: _____
Address: _____

Social Security Number: _____
Home Phone: _____
Cell Phone: _____
E-mail: _____

Complete the following using additional sheets of paper as necessary.

1. Have you been accepted to a school to continue your education? What is the name/names of the schools to which you have been accepted, and which school do you plan to attend?
2. Do you plan to participate in any extracurricular activity while continuing your education? (sports, band etc.)
3. Please list the anticipated tuition/school expenses. Also list what funds, if any, that will come from grants, scholarships, or family contributions.
4. What is your current grade point average and rank in the senior class?
5. Attach three letters of recommendation; two from high school faculty and one personal (non-relative).
6. List any civic or extracurricular activity in which you have been involved during your four years of high school.
7. On a separate sheet of paper give a brief summary of plans for your continued education, career goals, and how this scholarship will assist you in achieving those goals.
8. Attach a High School transcript including a current photo with your application.
9. Provide the first and last names of your parents/guardians.
10. Provide the current mailing address and phone numbers of your parents/guardians.

My signature indicates that I fully understand that should I be chosen as a recipient of the James B. Plummer Memorial Scholarship; all funds will be paid directly to the school that I am attending. Payment of all funds is contingent upon proof of admission and registration for each semester during the school year.

Applicant	Date	Parent/Guardian	Date
-----------	------	-----------------	------

The James B. Plummer Memorial Scholarship application should be submitted in a sealed 9 x 12 manila envelope to Ms. Evans.

**** Deadline for filing application: 3 P.M.- LAST FRIDAY OF MARCH ****