

Submit application to: MVHS Counselor	Scholarship Amount: Application Deadline:	\$ 1,000.00 2nd Friday in April
Applica	ant Information	
Name		Today's Date (mm/dd/yyyy)
Cumulative GPA Composite ACT® Sc	core	
List the college preparatory classes you have completed during high sc	chool: (App	proximately 1,000 characters, or attach sheet
Describe both a short-term and a long-term goal you wish to accomplis	sh. (App	proximately 1,000 characters, or attach sheet
List the college in which you are enrolled and intend to attend:		
Disclaim	ner and Signature	

I certify that the above information disclosed in this application is true and accurate to the best of my knowledge. I agree to abide by the decision(s) of the scholarship committee, and understand that decisions are final and not open to contest. A false statement, alteration or omission of pertinent information from this application will be considered just cause for removal of application from scholarship consideration.

Signature: _____

Date: