

**CLASS OF 2024**  
**SEDRO-WOOLLEY COMMUNITY SCHOLARSHIP**  
**APPLICATION INSTRUCTIONS**

*There are 25 + Sedro-Woolley organizations/groups contributing to the SW Community Scholarship!*

Every scholarship has different selection criteria, but all will look for evidence of:

- \*Future Planning      \*High School Involvement
- \*Volunteer/Community Involvement      \*Academic Preparation
- \*Financial Need      \* Strength of Recommendation(s)

**REQUIREMENTS:**

- Complete the application questions and two short answer essays. It should be typed if at all possible. If you cannot type it, please fill it out **NEATLY** in pen. *If you need additional space feel free to type on a separate page.*
- “Estimated Resources and Cost of School”
- Check the box allowing the counseling office to release your first-semester **transcript**.
- Include TWO **letter(s) of recommendation**.
- Feel free to add an academic resume.
- Scan and submit your application to Ms. Rodriguez via email at **rrodriguez+scholarship@sbsd101.org** and **Hand deliver a hard copy to her office and sign that it was accepted by February 20th.**

**CLASS OF 2024**

*\*If you need additional space feel free to type on a separate page.*

# SEDRO-WOLLEY COMMUNITY SCHOLARSHIP APPLICATION

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

ADDRESS: (STREET) \_\_\_\_\_ (CITY) \_\_\_\_\_ (ZIP) \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

CUMULATIVE GPA: \_\_\_\_\_ CLASS RANK \_\_\_\_\_

**WHAT SCHOOL ACTIVITIES (CLUBS/SPORTS) HAVE YOU PARTICIPATED IN?**

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**WHAT VOLUNTEER WORK EXPERIENCE DO YOU HAVE?**

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**LIST ANY AWARDS AND/OR HONORS YOU HAVE RECEIVED:**

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**LIST ANY ADVANCED COURSES THAT YOU HAVE COMPLETED OR THAT YOU ARE CURRENTLY ENROLLED IN:**

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**POST-SECONDARY PLANS:**

Community /Technical School (2 year)

*\*If you need additional space feel free to type on a separate page.*

College/University (4 year)

**SCHOOL CHOICE #1:** Enter text

**SCHOOL CHOICE #2:** Enter text

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**GUARDIAN/PARENT 1- :** Enter text

**OCCUPATION:** Enter text

**GUARDIAN/PARENT 2:** Enter text

**OCCUPATION:** Enter text

**NUMBER OF SIBLINGS BEING SUPPORTED BY PARENTS:** Enter text

**IS YOUR FATHER OR MOTHER CURRENTLY SERVING IN THE U.S. MILITARY OR A MILITARY VETERAN?** YES:  NO:

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**ESTIMATE THE *TOTAL COST* OF YOUR SCHOOL OF CHOICE.**

(e.g., tuition/fees/books/transportation/housing/food)

Estimated total cost: Enter text

**ESTIMATE YOUR *TOTAL RESOURCES* YOU HAVE TO PAY FOR YOUR *FIRST YEAR OF COLLEGE.*** (e.g., savings, support from parents)

Estimated total resources: Enter text

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**DO YOU HAVE A FAMILY MEMBER WHO IS A MEMBER OF A LOCAL SERVICE CLUB?** (*Examples: Rotary, Lions, Eagles, Masons, American Legion, AFSCME*)

NO

YES– Name Enter text

Relationship Enter text

**DID YOU ATTEND CLEAR LAKE ELEMENTARY SCHOOL?**  NO  YES

**PLEASE INCLUDE ANY ADDITIONAL INFORMATION YOU'D LIKE THE SCHOLARSHIP COMMITTEES TO CONSIDER HERE:**

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**I GIVE THE COUNSELING DEPARTMENT PERMISSION TO RELEASE MY 1<sup>ST</sup> SEMESTER TRANSCRIPT.**

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(Student Signature)

(Date)

**1. WHO OR WHAT HAS BEEN THE BIGGEST INFLUENCE IN YOUR LIFE & WHY?**

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*\*If you need additional space feel free to type on a separate page.*

