## James L. Streater Memorial Scholarship <a href="Personal Information">Personal Information</a>

Last Name:	First Name:	Middle Initial:		
Date of Birth:				
Street Address:				
City:	State:	Zip Code:		
Home Telephone:	Cellular Telephone:			
Parent/Guardian:	Parent/Guardian's Telephone:			
Current High School:		GPA:		
School's Street Address:				
School's City:	School's State:	School's Zip Code:		
School's Telephone:				
Name of Father/Guardian:	Parental Infor	mation		
Street Address:				
City:	State:	Zip Code:		
Occupation:		Approximate Annual Salary:		
Employer:				
Name of Mother/Guardian:				
Street Address:				
City:	State:	Zip Code:		
Occupation:		Approximate Annual Salary:		
Employer:				
Number of Children Living at Ho	ne:	Number of Children Attending College:		

List in order of preference three colleges, universities, or business schools where you have formally applied or plan to apply for admission.

ne of Institution:	Address:	Accep Yes I
ic of institution.	Auuress.	1031
List school and com	nunity extracurricular activities including athletics, music more space is needed, attach another sheet.)	e, and any offices held. (If
List academic a	wards and/or honors received. (If more space is needed, at	tach another sheet.)
	What organizations are you associated with and how?	
	What is community involvement?	
	What is community involvement?	
	What do you enjoy about your community?	

How important is community involvement to you?				
How important is education to you?				
Please state the reason(s) why you need financial assistance. (If more space is needed, attach another sheet.)				
Please use this space to record additional information you feel would be of interest to the scholarship committee.				
500-1000 word essay. Please choose ONE of three prompts. (Attach more pages if necessary)				

	Church Recommendation	
	Community Recommendation	
	School Recommendation	
	Transcripts	
	Resume	
	Application	
	1emorial Scholarship Checklist	
Applicant's Signature:	Date:	