



Scholarship Application Form

ALL INFORMATION WILL BE KEPT CONFIDENTIAL

First Name:

Last Name:

First name you prefer to be called (if different):

Social Security Number:

Date of Birth:

Home Address

Street:

City:

Zip:

County:

Cell phone:

Email address:

Name of parent(s) or guardian(s) with whom you live:

Parent's cell phone:

Parent's email address:

Do you plan to work while at college?

Full time?

Part time?

Work/study program?

Name of your High School:

Principal:

Address

Street:

City:

Zip:

Senior Counselor's Name:

Senior Counselor's Email:

GPA:

Class Rank:

Class Size:

ACT Score:

Academic Clubs:

Academic Awards:

High School Offices Held:

Community Activities:

Golf and Other Athletics

Average Golf Score or Handicap?

Where do you plan to attend college?

Have you applied for admission?

Have you been accepted?

What field of study do you plan to pursue?

If selected, I authorize the Birmingham Golf Association to use my name and photograph, and I agree not to hold Birmingham Golf Association liable for any such use.

Signature of Applicant

Date

Signature of Parent/Guardian

Date

APPLICATION MUST BE SIGNED BY BOTH APPLICANT AND PARENT/GUARDIAN. ALL INFORMATION WILL BE KEPT

CONFIDENTIAL.