## MAMAKATING FIRST AID SQUAD - SCHOLARSHIP APPLICATION (<u>must</u> live in the Town of Mamakating)

Name:		,~ <i>b.</i>
Telephone:	elephone: Date of Birth:	
High School Pre	sently Attending:	
Rank in Class:	Out of	Grade Point Average:
Father's Occupa	tion:	Mother's:
		and ages:
List School Activ	vities & Honors:	
List Community	(non-school) Activit	ies & Honors:
		oted:
Have You Been	Awarded Any Schola	arships:If Yes, Please list
Name & Value: _		
What Is Your Fu	ture Field of Endeav	or:
future plans. Also	include any addition	e reason for selecting your career and all information which might be pertinent to tances, financial circumstances, etc.
Applications mu Please return to:	St be received by Ap Mamakating First A Scholarship Applic P.O. Box 525	Aid Squad ations