



Farmington Emblem Club #460 Scholarship



Student's Name: _____

Date and Place of Birth: _____

Home Address: _____

Telephone: _____

Father's Name: _____

Mother's Name: _____

High School or College Attended: _____ GPA: _____

Are you related to an Emblem Club Member? Yes No

If yes, what is the name and relationship? _____

Name of College or School you plan to attend or are attending: _____

Address of College or School: _____

Program and Major: _____

Number of Years: _____

Typical Yearly expenses (Tuition, room & board, books, etc.): _____

Please comment on any unusual circumstances: _____

Please submit with application: Two letters of recommendation from someone not related.
A letter describing yourself and activities that you have been involved in the past four years.
A transcript.

Signature of Applicant _____

Signature of Parent
(If applicant is under 18 years old) _____

Please return to Guidance Office by 04/14/2023 or email to SCSmith.Wbbf@gmail.com