

**DON AND MARCELLA MCCORMICK SCHOLARSHIP FUND APPLICATION**  
**Due June 1, 2020**

Name and Address of Applicant

Social Security Number

\_\_\_\_\_  
(Last)                      (First)                      (Middle)

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

\_\_\_\_\_  
(Street)                      (City)                      (State & Zip)

Telephone No. \_\_\_\_\_

\_\_\_\_\_  
(Email)

Name of High School \_\_\_\_\_

Graduation Year \_\_\_\_\_

Name and Address of Parent or Guardian

\_\_\_\_\_  
(Last)                      (First)                      (Middle)

\_\_\_\_\_  
(Street)                      (City)                      (State & Zip)

List in order of preference the names and addresses of colleges/universities to which you have applied. Indicate if you have been accepted for admission. Indicate if you have chosen which institution you will attend.

<b>Institution</b>	<b>Address</b>	<b>Accepted</b>	<b>Attending</b>
_____	_____		
_____	_____		
_____	_____		

1. If you have decided which university you will be attending, please describe the reasons for this decision.

2. Have you chosen a major? If so, please explain why you chose this major and provide a brief statement about your career goals.
  
3. Are there any circumstances about your current financial situation that make scholarship assistance particularly important?
  
  
4. List all honors, recognitions, organizations, prizes, church activities etc. received and participated in during grades 10 through 12. Attach separate sheet if necessary.

Name of Organization	Dates of Participation	Office Held
_____	_____	_____
_____	_____	_____
_____	_____	_____

5. Have you applied for student loans or other financial assistance? Please give details.
  
  
6. Do you have a juvenile or criminal record? If so, please explain.
  
  
7. Please submit your ACT scores and a transcript of your high school records with this application.

Comments:

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To the best of my knowledge, the above information is complete and correct.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date