

**ELMORE COUNTY REPUBLICANS (ECREC) ANNUAL SCHOLARSHIP APPLICATION\***

NAME \_\_\_\_\_  
Last First Middle

ADDRESS \_\_\_\_\_  
Street City Zip

Age \_\_\_\_\_ Date of Birth \_\_\_\_\_ SSN(last four): xxx-xx-\_\_\_\_\_

Phone number: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

High School Attending \_\_\_\_\_ GPA \_\_\_\_\_ SAT \_\_\_\_\_ ACT \_\_\_\_\_

Institutions Accepted \_\_\_\_\_

Planned Course of Study \_\_\_\_\_

Please list any other scholarships you have received and the amounts \_\_\_\_\_

Honors Received and year \_\_\_\_\_

List involvement in sports or other school activities \_\_\_\_\_

Hobbies \_\_\_\_\_

Church you attend and activities involved (optional) \_\_\_\_\_

REFERENCES: Give three names, addresses and telephone numbers of local principal, teacher or minister and one local citizen (non-relative) who has known you at least two years.

NAME: \_\_\_\_\_ Address: \_\_\_\_\_

Phone number: \_\_\_\_\_

NAME: \_\_\_\_\_ Address \_\_\_\_\_

Phone number: \_\_\_\_\_

NAME: \_\_\_\_\_ Address \_\_\_\_\_

Phone number: \_\_\_\_\_

I hereby certify that the information on this application is complete and correct to the best of my knowledge. I hereby grant permission to the ECREC to contact my school, if necessary, and to

use my name, likeness, and photograph in promotional materials in the event that I am selected to receive a scholarship.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

\*No political affiliation is required to apply for this scholarship

Form A