

**EDDIE ERWIN MEMORIAL SCHOLARSHIP  
APPLICATION**

1. Full Name: \_\_\_\_\_

2. Address: \_\_\_\_\_

3. Phone Number: \_\_\_\_\_

4. Date of birth: \_\_\_\_\_

5. Father's Name; address: \_\_\_\_\_

\_\_\_\_\_

6. Mother's Name; address: \_\_\_\_\_

\_\_\_\_\_

7. School attending presently: \_\_\_\_\_

8. School you plan to attend in upcoming school year: \_\_\_\_\_

\_\_\_\_\_ Accepted? Yes \_\_\_\_\_ No \_\_\_\_\_

9. Church membership: \_\_\_\_\_

10. Describe your anticipated course of study: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

11. State your career objectives: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



14. List each honor award you have received during your high school or college years:

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15. For each job you have held, please list the following:

<u>Employer</u>	<u>Address</u>	<u>Dates of Employment</u>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>

*(Please include your anticipated summer employment, if applicable)*

16. If you are still employed by one of the employers listed in response to No. 15 or if you anticipate working during the coming summer or during the upcoming school year, state the amount of income you anticipate earning in that employment:

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17. If you have any physical handicap, please describe that handicap:

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18. List your brothers and sisters in college and identify the school each attends:

_____	_____
_____	_____
_____	_____

19. List all scholarships that you have received and state the amount of money provided by that scholarship for the upcoming school year:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*I hereby certify, by signing this application, that the information set out above is true and accurate.*

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date