



Scholarship Application

Date _____, 20____

Student's Name _____

Home Address _____

Telephone Number _____ - _____ - _____

Parent/Guardian's Name _____

Address _____

Telephone Number _____ - _____ - _____

GPA _____

I am a student in good standing at _____
(name of high school)

I plan to attend _____ in the fall.
(name of college)

My high school counselor is _____.
(name of counselor)

Student's Signature _____

A copy of your High School Transcript must be submitted with this application form to be eligible.

**Mail this application and your transcript to:
S&T, Attention: Scholarship Committee, PO Box 99, Brewster, KS 67732
Must be received or postmarked by March 23, 2009.**