

Region 2 Youth Scholarship Application

1. General Information:

Name: _____ Date of Birth _____
(last) (first) (middle initial)

Address: _____
(number & street) (city) (state) (zip)

Phone: _____
(home) (cell phone)

Email: _____

Region 2 Club Name: _____ AHA# _____

Youth Advisor Contact Information: _____

1. Academic Information:

High School: _____
(name and complete address)

Your Grade Point Average: (GPA) _____

Date of Graduation _____

School you are planning to attend: _____

Career Objective: _____

Scholastic Honors and/or Achievements: _____

Extracurricular Activities You Have Been Involved In: _____

Agreement and Understanding:

Any application that is incomplete and/or submitted after _____ will not be considered for candidacy. I certify that the information I have given on this application is true and accurate to the best of my knowledge.

Applicant Signature:

_____ Date _____

Parent/Guardian Signature:

_____ Date _____

Date of Submission

Submit by May 15, 2024:

Katie Russell

katierussell1239@yahoo.com