



2018 Scholarship Program Application

General Information

Name: _____

Permanent Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____

Email: _____

Date of Birth: _____ Sex: F ___ M ___

Parents Names: _____

High School Attended: _____

High School Graduation Date: _____

High School Grade Point Average: _____

Information Career and College

College Attending (2018): _____

City: _____ State: _____

Anticipated College Graduation Date: _____

Career Goal: _____

Majors/ Minors: _____

Area(s) of Study: _____

Employment

Please provide your employment history:

Employer: Nature of Work: Dates:

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please attach one written letter of recommendation from a teacher, pastor, mentor, supervisor, etc.

Applicant's Signature _____ Date _____

I/We, Name, _____

Residing at _____

Parent ___ Guardian ___ of the applicant do hereby certify that I/we have read the applicant's completed application for scholarship and to the best of my/our knowledge and belief find the information provided to be true and correct. I/We understand this award is contingent upon graduation from high school and be enrolled at a college in the fall of this year. If not, the award shall be returned to the Westlake Historical Society.

Signed: _____ Date: _____

Signed: _____ Date: _____

Mail all documents to:

Attn: Scholarship Committee
Westlake Historical Society
1371A Clague Road
Westlake, Ohio 44145

Questions may be e-mailed to claguemuseum@yahoo.com or phone 216-848-0680.

All applications must be received by April 2, 2018

Recipient will be notified