



THE KIWANIS CLUB OF FORT WALTON BEACH
SCHOLARSHIP APPLICATION

Deadline for submission: May 30, 2017 Email application to sykes4615@aol.com or send to Kiwanis Club, PO Box 2198, Fort Walton Beach, FL 32549

1. Name of Applicant (Please Print): _____

Address: _____

Phone Number: _____ Social Security Number: _____

2. Names of Parents: _____

Parents' Yearly Income: (Father) _____ (Mother) _____

3. College Name and Major: _____

4. Tuition Assistance: List assistance you have applied for or expect to receive. (Use back of this form if necessary):

5. Activities & Awards: List extra-curricular activities and special honors or service awards you have received in regard to honor societies, service clubs, offices held, and participation in community activities. (Use back of form if necessary):

Student's Signature: _____

Parents' Signature: _____

Furnish copy of school transcript. Weighted GPA _____ Unweighted GPA _____

SAT Score _____ ACT Score _____ Class Rank _____ Class Size _____

Furnish the names of two teachers and your senior counselor, who, by their signatures below, indicate your worthiness and academic qualifications in consideration for this scholarship.

Signature Teacher

Signature Teacher

Signature Counselor

Print Name

Print Name

Print Name
