

\_\_\_\_\_  
Name of the scholarship for which you are applying.

Name: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
E-Mail: \_\_\_\_\_  
Student ID# \_\_\_\_\_

**PROVISION:** I, \_\_\_\_\_, hereby stipulate that the information  
Print Name  
contained within these materials have been independently completed with  
*minimal* parental involvement. Failure to comply may result in disqualification  
and/or loss of scholarship.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Parent Signature