



Junior Auxiliary of Ruston

Care today...character tomorrow

P.O. Box 1762
Ruston, LA 71273-1762

Pearls of Service Scholarship Application 2017

Name _____ DOB: _____

Home Mailing Address: _____

Best Contact Phone Number: _____

High School: _____ GPA: _____

College to Attend: _____

Intended Major in College: _____

Work Experience: _____

School Honors, Activities, and Clubs: _____

Community Activities Service: _____

Hobbies and Special Skills: _____

Future Career/Educational Goals: _____

Pearls of Service Scholarship Application 2017

Mother's Name: _____ Father's Name: _____
Address: _____ Address: _____
Phone: _____ Phone: _____
Occupation: _____ Occupation: _____
Place of Employment: _____ Place of Employment: _____

Number of Children in Family: _____ Total Number Living in Household: _____

Combined Family Income:

_____ <\$25,000
_____ \$25,000 - \$50,000
_____ \$50,000 - \$75,000
_____ \$75,000 - \$100,000
_____ >\$100,000

Any other information that would be helpful to the selection committee: _____

On a separate page, please submit a brief summary explaining where you plan to attend college and how you plan to use your degree.

Include a letter of recommendation from a teacher, counselor, employer, mentor, or leader of civic organization.

Include official high school transcripts, if available, to verify GPA.

I AGREE TO NOTIFY THE SCHOLARSHIP COMMITTEE OF ANY CHANGE OF NAME, ADDRESS, OR A CHANGE IN SELECTED COLLEGE.

Date

Applicant Signature