

Dr. C.R. Williams Memorial Scholarship - \$250.00

1. Complete the S-D-A Local Scholarship Application form.
2. On a separate sheet of paper write a short paragraph why you are choosing this particular area of study, and your plans for after graduation from college.
3. Include a copy of your transcript.

S-D-A Local Scholarship Application

Demographic Information Form:

Name: _____

Age: _____

Address: _____

Phone #: _____

Class Rank: _____ of _____ Grade Point Average: _____ ACT Score: _____

Career Information:

What College do you plan to attend? _____

Have you been accepted? _____

What field of study are you planning to pursue?

What are your career goals?

List below (or on a separate page) any High School Honors you have earned:

List below (or on a separate page) your High School activities:

List below (or on a separate page) your Community/ Church activities:

(Student's Signature)

(Parent/Guardian Signature)