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| **We Give Thanks Inc.**  *2018-2019 SCHOLARSHIP APPLICATION*  *DEADLINE April 15, 2019*  Scholarships are awarded only to ***graduating high school students living in Orange County, CA.*** Awards are based on academic excellence, outstanding community service, need, and school and community leadership.  ***Read all instructions before completing application****.*  NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  HOME ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  CITY\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ZIP\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  TELEPHONE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_CELL PHONE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_E-MAIL\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  HIGH SCHOOL YOU ARE ATTENDING\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  COLLEGE YOU PLAN TO ATTEND AND MAJOR\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  PROFESSIONAL PLANS FOR THE FUTURE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  IMMEDIATE FAMILY MEMBERS (NAMES, AGES OF SIBLINGS)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  HIGH SCHOOL COUNSELOR \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Complete the following pages describing your community service and school activities. Do not attach any additional pages for activities. ATTACHMENTS NOT SPECIFIED IN THE APPLICATION FORM WILL NOT BE READ. Scholarship form cannot be completed in handwriting. Use Times Roman, 12-point font.**  **A transcript of your high school work must be included with application.**  **Include with your application three letters of recommendation from persons at least 21 years of age (not relatives) who are familiar with you, your community and school activities, and your leadership skills** |
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**We Give Thanks Inc.**

**2018-2019 Scholarship**

***2018-2019* COMMUNITY SERVICE ACTIVITIES**

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| **ACTIVITY** | **ORGANIZATION** | **HOURS SPENT** |
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**We Give Thanks, Inc.**

**2018-2019 Scholarship**

***2017-2018* COMMUNITY SERVICE ACTIVITIES**

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| **ACTIVITY** | **ORGANIZATION** | **HOURS SPENT** |
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**We Give Thanks, Inc.**

**2018-2019 Scholarship**

***2016-2017* COMMUNITY SERVICE ACTIVITIES**

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| **ACTIVITY** | **ORGANIZATION** | **HOURS SPENT** |
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**We Give Thanks Inc.**

**2018-2019 Scholarship**

***2015-2016* COMMUNITY SERVICE ACTIVITIES**

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| **ACTIVITY** | **ORGANIZATION** | **HOURS SPENT** |
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##### SCHOOL ACTIVITIES

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| **ACTIVITY** | **18/19** | **17/18** | **16/17** | **15/16** | **SPECIAL AWARD** | **LEADERSHIP POSITION** |
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**REMINDER**: BE SURE TO INCLUDE ALL PAGES INCLUDING REFERENCES AND TRANSCRIPT WITH THE COMPLETED APPLICATION FORM. INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.

\_\_\_\_\_Front page completed

\_\_\_\_\_Community activities pages completed

\_\_\_\_\_School activities page completed

\_\_\_\_\_Transcript attached

\_\_\_\_\_Three personal references attached

\_\_\_\_\_Higher Education Budget completed

MAIL COMPLETED APPLICATION TO:

**Dr. June Glenn  
5239 E. Glen Arbor Lane  
Anaheim, CA 92807**

MUST BE POSTMARKED NO LATER THAN APRIL 15, 2019

WHY DO YOU VOLUNTEER?

If awarded a scholarship, I agree to allow my name, biographical data, and photograph image to be released and to be used in any public association with the award.

The content of this application is truthful and accurate.

I understand that the information I provide in this application may be verified.

Applicant’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**You will be notified if you are to be interviewed as part of the scholarship process. Interviews will be held later for those notified. Interviews will be used as part of the selection process to determine the final scholarship recipients.**

**HIGHER EDUCATION BUDGET**

Name of applicant ­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please take extra care in completing this portion of your scholarship application. We have found that many graduating seniors have very little idea of the actual cost of higher education, even those who have received substantial scholarships and financial aid. Discuss this budget with your school counselor and parents. The Higher Education Budget is to be submitted as part of the application by APRIL 15, 2019.

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| **Annual Estimated School Expense** |  | **Total Estimated Available Funds until Graduation from College** |  |
|  |  |  |  |
| **Registration fees** | **$** | **Funds on hand** | **$** |
| **Books and supplies** |  | **Estimated student earnings** |  |
| **Rent or dorm expense** |  | **Support from family** |  |
| **Food** |  | **Scholarships** |  |
| **Clothing, laundry, and cleaning** |  | **Federal and State Financial Aid** |  |
| **Transportation** |  | **Loans** |  |
| **Recreation and entertainment** |  | **Other** |  |
| **Fixed Payments** |  |  |  |
| **Other** |  |  |  |
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| **Total Annual Expenses** |  | **Total Available Income for College** |  |

**Expenses based on what university or college?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parents Annual Income \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Comments:**

**Printed name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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