

## **CLETCHER-WESSALE SCHOLARSHIP APPLICATION**

Applicant Name:		SS #:
Complete address:		Phone:
Date of Birth:	ACT/SAT Composite: _	High School Class Rank:
High School GPA:	College GPA:	College years completed:
College/University to be attended/or	attending:	al transcript and proof of college enrollment)
(***Current year high school	seniors must provide offici	al transcript and proof of college enrollment)
College Major:	Minor:	
	pheants must menude curren	t transcript and proof of continuing enronment)
Projected Annual College Cost: Tuit		lition:
	B	oom/Board: ooks/Fees:
Professional Experience:		
Professional Memberships:		
Extracurricular activities, high school and/or college:		
Awards and achievements during high school or college:		
Reason you are pursuing this career:		
To the best of my knowledge, all the information on this page is accurate and correct.		
Signature:		Date:

<u>Please save documents as .pdf files and attach to email the completed and signed application, transcript and</u> <u>enrollment proof by April 12, 2024</u> to <u>Dave.Brandon@hickorypointbank.com</u>. Questions, call 217-872-3915.