Scholarship Contest Entry Form



Complete the following information and send with your contest submission. Please type or print clearly in blue or black ink.

ry form and	d contest submissio	on (essay or video) due:	March 31, 2	021	
Name: _					
Address:					
Telephone	Number:				
Email Addı	ress:				
High School	ol/College:				
Graduation	n Date:		Current GPA:		
Name of in	nstitution(s) you are a	ttending or planning to atten	d:		
Certification	on and Release Autho	rization			
original v If I am av	work. I also authori	s true, complete and acc ze release of information ip, Neighborhood Credit	n to confirm and/or	r verify	this application
Student's S	Signature:			Date:	
Parent/Gua	ardian Signature:			Date:	
Check One	: :				
I am:	a member	related to a member			