The Oregon GCSA Legacy Scholarship Application Form

Please type this form if possible

Section 1 – Applican	plicant Information Date	
Name		Date
Permanent Address		
City	State	Zip
Cell Phone ()	Email	
		s No Year Awarded: award but can reapply after a one-year
Section 2 – Member	Relative Information	
Name of Member		
Relationship to Applicant:	Parent Grandparent	
Oregon GCSA Member is:	Living □ Deceased	
City	State	Zip
Cell Phone ()	Email	
Member Since(Month	/Year)	
Current Classification		

Member's Signature						
Section 3 List in chronological order high schools attended, then colleges. It is very important that this information is complete. (Note: the information provided must be documented by an official schotranscript.)						
*If pending, please indicate the da	te you expect to graduate	2.				
Are you attending college? If so, which college?						
If not, have you been accepted for						
Which School?						
What is/will be your major?						
List any academic distinctions and	honors you have receive	ed during high school	or college:			
List your activities (clubs, organiza	tions, community service	e, etc.):				

Section 3 continued							
ist any offices held in	n school or	community	organizations:				
ist employment you	have held s	since enterin	g high school:				
Type of work		Employer		Employment dates			
List any other scholar	ships award	ded:					
Scholarship Spon				Amount			

Section 4

Attach a typed essay that does not exceed 500 words. The essay must be original and not previously submitted to Oregon GCSA. The essay should be on one of the following topics:

- 1. Who has been the most influential person in your life? Why?
- 2. How has your education contributed to who you are today?
- 3. Please describe the personal achievement of which you are most proud.
- 4. Identify a social or political issue that concerns you and explain what actions you have taken in your community to address it.
- 5. What are your short- and long-term goals?
- 6. Why is protecting the environment important to you?

Certification

I certify that the above information is true and correct to the best of my knowledge.

(Applicant's Signature) (Date)