

The Arc Williamson County Scholarship Application-2018

Last Name: _____ Sex: F ___ M ___ Age: _____

First Name: _____ Nickname: _____

Address: _____ Email: _____

City: _____ State: _____ Zip: _____

Home Telephone No: _____ Cell : _____

Birth Date: ___ / ___ / ___ High School: _____

Father's Last Name: _____ First name: _____

Father's Address: _____

Father's Telephone _____

Father's E-mail _____

Mother's Last Name: _____ First Name: _____

Mother's Address: _____

Mother's Telephone _____ Mother's E-mail _____

Other Family Members

Name	Age	Relationship	Grade in School
1. _____			
2. _____			
3. _____			
4. _____			

SHORT ESSAYS

What do you enjoy doing when you are not in school?

Do you have any work experience?

Have you received any awards that you are particularly proud of?

Why do you want to continue your education after high school?

Describe the reasons you received student support services while you were in high school and how this helped you.

Where do you plan on continuing your education?

What is your dream job?

Student Signature

Date

Mother/Guardian/Conservator Signature

Date

Father/Guardian/Conservator Signature

Date

RETURN TO: THE ARC WILLIAMSON COUNTY
129 West Fowlkes Street, Suite 151
Franklin, TN 37064

BY: APRIL 1, 2018

For Questions call Sharon Bottorff at The Arc at 790-5815, ext. 3 or e-mail sbbarc@thearcwc.org