CARROLL COUNTY HELP CENTER
2017 Scholarship Application

Date_____

Applicant Name: _____

Address: _____

Phone: _____

Parent Name(s): _____

High School: _____

Date of Graduation: _____

College or Vocational School you plan on attending:

_____

Starting Date at this school: _____

Guidelines: To be considered for this scholarship, the student must:
*complete this application
*write a short essay in your own words telling your inspiration, needs and plans to use the training you will receive
*provide the name of the school and the starting date where you have been accepted
*request two written recommendations: may come from teachers, clergy or townspeople who are well acquainted with the applicant's motivation, interest, goals and character.

Application with essay and two recommendations are due by March 1, 2017.
Mail to:

Scholarship Committee
304 S. Broad Street
Lanark, Il 61046

Recipients' will be notified by mail by April 1, 2017