

STEFANIE KRISTEN DERU
SCHOLARSHIP APPLICATION

Name: _____

Mailing Address: _____

Name of High School: _____

Grade Point Average: _____

Number of school age children in family: _____

Number of parents/guardians working: _____

List any work experience: _____

List any extra-curricular activities: _____

List any leadership experiences: _____

List any community activities in which you have been involved:

List any honors/awards you have received: _____

College you plan to attend: _____

Write a brief letter explaining why you feel you should be awarded or are in need of the Stefanie Deru Scholarship. Please include all qualifications/personal thoughts that would make you a good candidate for this scholarship. (Please do letter on a separate sheet).

Signature of two Business Education/Career Tech Teachers who would recommend you for this honor:

