2024

SCHOLARSHIP APPLICATION

PERSONAL INFORMATION

Full Name	
Date of Birth	Gender Male Female Prefer not to answer
Address	
City	State Zip
Phone Number	E-Mail
Name of High School	Current GPA (unweighted):
Student Signature	Date
Parent/Guardian Nan	ne
Parent Signature	Date
Parent Phone Numbe	r Parent Email
ACADEMIC INFORMATION	
_	ge, or technical school do you plan to attend? ided, please state that here.
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Intended Major:	Part-time or Full-time student?

ESSAY

Essay should be a minimum of 300 words with a maximum of 500. Essays should be typed.

Essay Question:

Why is pursuing a career in the field of mental health important to you?

Deadline to Apply: April 30, 2024.

For scholarship consideration, please submit this completed application, a copy of your high school transcripts, and your typed essay via email to: kris@onadragonflyswings.com

More Information:

www.onadragonflyswings.com Email: kris@onadragonflyswings.com



FROM DARKNESS INTO LIGHT.