



# SONORA HIGH SCHOOL

430 North Washington Street, Sonora, CA 95370  
(209) 532-5511 | Fax (209) 533-1158 | www.sonorahigh.net  
Alissa Clifton, High School Counselor || Stacy Kroeze, High School Counselor

## Scholarship Application

**Instructions:** Keep form to one page in length. Do not attach separate sheets. Applications with spelling errors will be disqualified.

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Phone: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Did your family file a FAFSA application for financial aid this year:    yes           no

Please briefly explain your financial need:

Name and Location of school you plan to attend:

Type of College:           4 year           Community College           Trade/Vocational School

Major Career Interest: \_\_\_\_\_

Why did you choose this college and your major?

School Activities: (List clubs, competitive athletics, student government, committees and any offices you have held and special achievements.)

Community Activities: (List church membership and groups, scouts, volunteer work, etc.)

Employment: (List any part-time, full-time and summer employment)

Personal Statement: Choose one: (1) What factors in your childhood contributed to the person you are today, or (2) Discuss personal experience that motivated you in choosing your future plans.

**GPA:** \_\_\_\_\_ (To be completed by the counseling office after your application is completed)