## Bellevue Public Schools Comprehensive Scholarship Application

## Please follow these instructions carefully to be considered for the scholarships you selected:

- 1. Fill out online then print final copy. Neatness counts. (NO written applications accepted)
- 2. Be sure you and a parent sign and date the application.
- 3. Be sure to make all copies required. See cover sheet for instructions.

Completed application packets should be submitted to Mrs. Britten no later than 2:00 pm on December 19, 2025.

Last Name:	First Name:			Middle Initial:		
Which high school do you attend?						
Your Address:						
Home Phone:		Cell Phone:				
ACT Composite Score:						
Father's Last Name:		First Name:		MI:		
Father's Occupation:		(retired active duty civ)				
Father's Place of Employment:						
Mother's Last Name:		First Nam	First Name:		MI:	
Mother's Occupation:			(retired active du		ıtyciv)	
Mother's Place of Employment:						
List names and ages of younger broth	nes and ages of younger brothers and		Name:		Age:	
Name:	Age:		Name:		Age:	
Name:	Age	:	Name:		Age:	
List the names of all other family me	mbers	who will be	attending college	e next year	<b>:</b>	
Name:	Age:		School:			
Name:	Age:		School:			
Name:	Age		School:			
List the colleges, universities, comm considering in order of preference:	unity co	olleges, or v	vocational/technic	al schools	you are	
First Choice:						
Second Choice:						
Third Choice:						
What is your intended major:						

What two high school activities have been your major focus and what contributions have you					
made to these activities?					
	. 1 11	41 4 6	•,		
What activities outside of school have you be organizations, volunteer work, etc.) and what					
, , ,					
Work Experience: List the places you have worked, dates of employment, and an approximate					
number of hours per week that you worked.	Chart (Ma /V)	Chan (Ma /Wa)	11		
Employer:	Start (Mo./Yr.) Date:	Stop (Mo./Yr.) Date:	Hour per Week:		
Position:					
Employer:	Start (Mo./Yr.) Date:	Stop (Mo./Yr.) Date:	Hour per Week:		
Position:					
Employer:	Start (Mo./Yr.) Date:	Stop (Mo./Yr.) Date:	Hour per Week:		
Position:	Date.	Daic.	WCCK.		

List all scholarships you have been awarded a	s of the date of this application.
•	1 <sup>st</sup> Yr Value:
	Renewable (Y/N)
Scholarship:	# of Yrs:
	1 <sup>st</sup> Yr Value:
	Renewable (Y/N)
Scholarship:	# of Yrs:
	1 <sup>st</sup> Yr Value:
	Renewable (Y/N)
Scholarship:	# of Yrs:
Why do you feel that you are deserving of a sc	holarship?
What are your goals for the future? Include he done to prepare for these goals, and what you	
goals.	iced to decomplish in the rature to ditain these
is accurate. We authorize the release of high se	rance: We certify that all information on this form chool transcripts, this form, the resume, and the ection committees for each scholarship selected.
Student's Signature:	Date:
Parent or Guardian Signature:	Date: