

Clarinda P.E.O. Scholarship Application

I. **Background Information**

Last name First name Middle name

Date of Birth Telephone number

Street address Town State Zip code

Name of parents: _____

Parents occupation: Father _____ Mom _____

P.E.O. Member(s) you are related to _____

Your relationship to that person(s) _____

Other children in the family and grade in school or college

II. **School and Community Information**

High School GPA _____

Please list your achievements, honors, elected positions and volunteer service experiences:

Please list your extracurricular activities:

Please list any courses you have taken or will take for college credit during the school year.

Please list employers and/or places you have worked.

III. **Goals and Aspirations**

State your possible major and career goals

List the name and location of educational institutions you are considering.

Considering your major and career goals, in what ways do you feel being a woman will enhance or hinder your education?

IV. **Please submit two letters of recommendation.**

V. This scholarship is available to Clarinda High School senior women who are relatives of active Clarinda PEO members. Up to \$1000 will be awarded at the Clarinda High School Award Ceremony.

When confirmation of "record of registration for second semester" is received by Treasurer Joyce Tornholm @ lojot@myfmtc.com, funds will be disbursed.

VI. This application is to be sent to : Vicki Fulk, 800 Logan Ct., Clarinda, IA 51632 or emailed to : vfulk55@gmail.com . The application is to be submitted no later than March 20, 2020.

Signature of Applicant _____ Date _____