Ohio State Trapshooting Foundation Scholarship Application

Name		
Address		
City	StateZip	
Phone #	Email	
Birthdate//	A.T.A. Member #	
Parents/Guardian		
High School		
College choice	Accepted?YN	
Major Field of Study		
Grade Point AverageC	lass Rank out of	
Test Scores: ACT SAT		
High School Principal	Phone #	
Guidance Counselor	Phone #	
Immediate family members graduat	ed from college	
Activities/Goals:		
Extracurricular activities throughout	high school:	
Plans and Goals: Include an essay o	describing your plans for college and beyond.	
Community Service/Volunteer Expe	rience:	

Financia	l Backg	round:
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(*required)

Father's Occupation*	Mother's Occupation*	Mother's Occupation*			
Children in family financially supported by your parents/guardians, including their ages:					
Number of children supported by family cu					
If you are employed, where?*	How long?	Hours/week			
How do you plan to finance college tuition,					
I have prepared the attached essay and verbest of my knowledge.	rify that the information contained in t	his application is true to the			
Signed					
Date					

Send to: Ohio State Trapshooting Foundation

Secretary Noreen Snively

P.O. Box 956

Ravenna, OH 44266