Frank 'Bo' Dunlap Foundation Scholarship Application

Applicant Information

Name:	Date:
Address:	
Phone:	
Parent or Guardian(s):	
My career goals are:	
College/Community or Technical school you have been accepted to:	
GPA:	
Please list high school activities and leadership positions held (currently or in the past):	
Community, Volunteer, and or Church activities:	
Honors and or awards:	

Work Experience	
Place of employment:	
Date started (if not currently still working there, please specify when you left)	
Duties:	
=	plarship committee, your need for financial assistance and any othe at may help in the selection of this scholarship. You may attach a shee d below.
Additional information:	
I confirm that all informa	ation on this application is accurate. If selected, I agree to allow Logar

Elm High School on behalf of the Bo Dunlap Foundation to use my name and photograph in promotional materials.

Signature: _____ Date: _____

^{*}Applications are due in the Logan Elm High School guidance office by noon on the last Wednesday in March.

^{**}Please attach your transcript