

NEWCOMERS' SCHOLARSHIP APPLICATION

DATE _____



SPONSOR MEMBER'S
NAME _____

RELATIONSHIP TO NEWCOMER MEMBER (if applicable) _____

APPLICANT'S NAME _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

EMAIL _____ PHONE _____

LAST SCHOOL ATTENDED _____ YEAR _____

GRADUATED YES _____ NO _____ WILL GRADUATE YEAR _____

DATE YOU WILL BE ATTENDING SCHOOL: DATE _____

NAME OF SCHOOL/COLLEGE/TRADE SCHOOL ACCEPTED AT: _____

ATTACH PROOF OF ENROLLMENT -- STUDENT ID NUMBER # _____

****IF SELECTED, THE FUNDS WILL BE DEPOSITED TO YOUR SCHOOL OF CHOICE IN STUDENT'S NAME.**

SCHOOL ADDRESS _____

MAJORING IN: _____ GOAL: _____

TECH SCHOOL GOAL: _____

PREVIOUS COMMUNITY SERVICE OR VOLUNTEER WORK: _____

TELL US WHAT YOU WANT US TO KNOW ABOUT YOU:

Attach a Letter of Recommendation Application must be received by September 1, 2024

Mail to: Redding Newcomers-Scholarship, PO Box 494204, Redding, CA 96049-4204