

Kyle's Heart Foundation Scholarship Application

Name: _____

Social Security Number: _____

Address: _____

Age: _____ Date of Birth: _____ Sex: _____

Contact Number: _____

Number of Years Attended Bath High School _____

Mother/ Step Mother Name: _____

Mothers Employer: _____

Father/Step Father name: _____

Fathers Employer: _____

Cumulative Grade Point Average: _____

Class Rank After Seven Semesters _____ out of _____

ACT Composite _____

Name & Address of college, University or other post-secondary School you wish to attend:

Have you been accepted for admission? _____ Yes _____ No

Major Field of Study you wish to pursue:

Give a brief statement of your educational and career goals:

List any academic awards won, scholastic organizations of which you are a member, or leadership positions held:

Name all school athletics participated in, number of years of membership, number of years lettered and leadership positions held:

<u>Athletic Activity</u>	<u># of years</u>	<u>Years Lettered</u>	<u>Leadership Position</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____