

DISTRICT 7 TRAPPERS SCHOLARSHIP APPLICATION

TOM HARDISKY MEMORIAL SCHOLARSHIP

Students e-mail address _____ Student's Date of Birth: _____

Students Name: (First) _____ MI _____ Last _____ Sex: M _____ F _____

Students Permanent Mailing Address: _____ Students Home Phone Number: _____

(Number and Street) _____ () _____

City _____ State _____ Zip _____

Nominating School _____

School Address _____ State _____ Zip _____

Academic Honors Received by Nominee _____

G.P.A. _____ Based on a 4.0 Non Weighted G.P.A. only Class Rank _____ Class Size _____

Clubs or Sports by Nominee _____

Institutions Where Applicant Has Applied:

<u>Institution</u>	<u>Accepted (Yes, No or Pending)</u>
_____	_____
_____	_____
_____	_____

Intended Profession/Career _____

All applicants are asked to attach an essay on the following topic: **WHAT ARE THE BENEFITS OF TRAPPING?**

CERTIFICATION STATEMENT:

I certify that the above information is factual and that there have been no misrepresentations of the facts.

Applicants Signature _____ Date _____

Do you know any club member or have any relatives who are members of the District 7 trappers association, or the Pennsylvania Trappers Association? Please list them.

Completed Applications must be received by April 30th.

Mail to: **LAURIE HARDISKY**

2621 EAST WINTER ROAD

LOGANTON PA 17747