



Friend of Youth

**OPTIMIST CLUB OF HENDERSON
MEMORIAL SCHOLARSHIP
RENEWAL APPLICATION**

This scholarship renewal application must be completed and all required documentation forwarded to the following address to arrive prior to July 15 after the previous scholarship term.

**Optimist Club of Henderson
C/O Scholarship Committee
P. O. Box 936
Henderson, N. C. 27536**

Please type or print.

Name: _____
Last First Middle

Address: _____
Street City County State Zip

Telephone: Home: _____ School Phone # (If applicable) _____

School presently attending: _____

Are you transferring to another school this term? Yes () No ()

This next year you will be a: Sophomore () Junior () Senior ()

Current Grade Point Average: _____ Major Field of Study: _____

Are you now receiving any other scholarship monies? Yes () (if yes, please list below) No ()

Other Scholarship Name: _____

Other Scholarship Name: _____

Other Scholarship Name: _____

Other Scholarship Name: _____

Other Scholarship Name: _____

Please attach the following documents to this application:

1. Certified copy of your transcript for the past year. ()
2. Students transferring to an institution must attach a copy of their letter of acceptance to this other institution.
3. Letter stating how this scholarship will be used by you.

Signature: _____ Date: _____