

**2018-2019**

**Jim Larson Memorial Scholarship**

Student must be a Braham Area H.S. senior who has been accepted and plans to attend a college/university – including a technical college, trade school, or community college.

**NAME:** \_\_\_\_\_

- 1. I have been accepted and plan to attend \_\_\_\_\_  
for the \_\_\_\_\_ program.**
- 2. Cumulative GPA: \_\_\_\_\_**
- 3. What are your goals and dreams for the next 5-10 years?**
- 4. List any work and volunteer experiences you have had while attending high school.**
- 5. When you are financially able, will you be willing to donate to the scholarships awarded at Braham Area School?**
- 6. Please list three persons of reference (not related to you). Include day and evening phone numbers - they will be contacted via phone.**

**Return completed application to the Guidance Office by March 21, 2019.**