

# CASCADE EDUCATION ASSOCIATION (CEA) SCHOLARSHIP APPLICATION

(NOTE: Typewritten statements are preferred to hand written submissions. Statements must be signed in all instances. Your completed application will not be returned. Attach additional sheets as necessary. Completed applications must be turned in by the 1<sup>st</sup> Monday in May.)

Applicant's Name: \_\_\_\_\_

Applicant's Address: \_\_\_\_\_

\_\_\_\_\_

City

\_\_\_\_\_

State

\_\_\_\_\_

Zip

Telephone: \_\_\_\_\_

Date of Graduation: \_\_\_\_\_

Cumulative GPA \_\_\_\_\_ Rank in Class: \_\_\_\_\_ of \_\_\_\_\_

\_\_\_\_\_

Signature

\_\_\_\_\_

Date

Schools Attended (grades 9 - 12)

Name of School	Date of Entrance	Period Attended
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Honors & Awards (state year & nature of honor or award.)

Scholastic: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Extra Curricular: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Civic (non-school related:) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Offices & positions of leadership. (State the name of organization, position & year.)

Scholastic: \_\_\_\_\_

Extra Curricular: \_\_\_\_\_  
\_\_\_\_\_

Civic: \_\_\_\_\_  
\_\_\_\_\_

Participation in school extra-curricular activities, where no office was held, indicating organization & year.

Scholastic: \_\_\_\_\_  
\_\_\_\_\_

Extra Curricular: \_\_\_\_\_  
\_\_\_\_\_

Civic: \_\_\_\_\_

\_\_\_\_\_

State your plans for enrollment in an accredited college or university: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you been granted scholarship aid? \_\_\_Yes \_\_\_No If yes, give details. \_\_\_\_\_

\_\_\_\_\_

State other applications you have made for scholarship aid. Give details. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you reason to expect scholarship aid from any other source? \_\_\_\_\_

If yes, give details. \_\_\_\_\_

\_\_\_\_\_

Positions held in gainful employment, periods of employment, average time employed each week, earnings, savings, etc.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**CASCADE EDUCATION ASSOCIATION (CEA) SCHOLARSHIP  
RECOMMENDATION**

Please return this form to Maria Schuman by the first Monday in May.

Name of Scholarship Applicant: \_\_\_\_\_

The student named above is making application for a Scholarship. Your frank evaluation of this candidate will be used in making the selection of the recipient.

1. Ability:

2. Leadership:

3. Personality:

4. Estimate of Student's Potential:

Date \_\_\_\_\_

Signed \_\_\_\_\_ Position \_\_\_\_\_