MEMORIAL SCHOLARSHIP

Application

Caballeros de Yuma

Proud Sponsor of Special Events in Yuma, AZ Since 1962

APPLICANT INFORMATION			
Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Phone	E-mail Address		
	Social Security No.	Date of Birth	
High School Name			
US Citizen? YES ☐ NO ☐			
Father's Name	Occupation & Employer		
Mother's Name	Occupation & Employer		

AWARDS AND ACHIEVEMENTS

COMMUNITY ACTIVITIES

SCHOOL ACTIVITIES

MAJOR/CAREER GOALS

MEMORIAL
SCHOLARSHIP

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SCHOLARSHIPS YOU WILL RECEIVE DURING THE COMING SCHOOL YEAR
SPECIAL CIRCUMSTANCES / PROBLEMS THAT AFFECT FAMILY FINANCES
PLEASE WRITE HOW YOU WOULD DESCRIBE YUMA TO SOMEONE YOU MIGHT MEET AT COLLEGE
ARIZONA UNIVERSITY/COLLEGE YOU PLAN TO ATTEND IN THE UPCOMING FALL

FURTHER INSTRUCTIONS	
A scholarship application form, completed in full, is required.	
On each question please provide information on your most significant awards or activities.	
COPY OF OFFICIAL TRANSCRIPT MUST BE ATTACHED.	
DISCLAIMER AND SIGNATURE	
I certify that my answers are true and complete to the best of my knowledge.	
If this application leads to an award, I understand that false or misleading information in my application or interview may result in its cancellation.	
Signature	Date

RETURN TO: CABALLEROS de YUMA, INC
P.O. Box 5987 Yuma, AZ 85366