## SOC Logo.jpgYouth Recognition - Scholarship Award Application – *Due April 9, 2021*

*“Each child is a winner in our eyes”*

# Suburban Optimist Club of Buena Park



|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Applicant Information | | | | | | | | | | | | | | | | | | |
| **Full Name:** |  | | | | | |  | | | | | | | |  |  | Male  Female | |
| Last | | | | | | | First | | | | | | | | M.I. | | | |
| **Address:** |  | | | | | | | | | | | | | |  | | | |
| Street Address | | | | | | | | | | | | | | | Apartment/Unit # | | | |
|  |  | | | | | | | | | | | | | |  | | |  |
|  | City | | | | | | | | | | | | | | State | | | ZIP Code |
| **Phone:** | | | |  | | | | **E-mail Address:** | | | |  | | | | | | |
| **High School:** | | |  | | | | | | Birth date: | | | |  | | | | | |
| **Possible Major:** | | |  | | | | | | ASB Office Held: | | | |  | | | | | |
| **Did you play SEYO:** | | | **Yes**  **No** | | | | | | Organization / Years: | | | |  | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| **Future Plans/Career goals:** | | |  | | | | | | | | | | | | | | | |
| **Honors/Awards:** | | |  | | | | | | | | | | | | | | | |
| **Student Activities:** | | |  | | | | | | | | | | | | | | | |
| **Community Activities:** | | |  | | | | | | | | | | | | | | | |
| **Leadership Positions Held:** | | |  | | | | | | | | | | | | | | | |
| **College(s) You Plan To Attend:**  (in order of Preference) | | | | | |  | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| GPA: | |  | | | Based On a Scale Of: | | | | | |  | | | SAT/ACT: | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| I hereby affirm that the information provided in this application is accurate and complete to the best of my knowledge. You can augment your application by providing your resume or a copy of your college application. | | | | | | | | | | | | | | | | | | |
| **Student Signature:** | | | |  | | | | | | **Date:** | |  | | | | | | |

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| --- |
| Additional Information |
| Please list any additional information below. |
|  |

**Parent or Guardian Permission Required:**

*I give my permission for my child/ward to participate in this event and grant the Optimist Club/International my permission to use a picture or video of my son/daughter (name on the application) for their public relations purposes. Optimist Club/International may use the photo in any publication they see fit.*

Signature Date / /

Print Name: Relationship

Please send completed application to:

**Kasie Leung**

**Senior Recognition Event Chairperson**

**Suburban Optimist Club of Buena Park**

**5478 Houston Ave**

**La Palma, CA 90623**

Email: theleungs4@gmail.com

Microsoft Word Version of This Form Available at: www.suburbanoptimistclub.org/Senior\_Recognition.htm