FAIRMONT HEIGHTS HIGH SCHOOL ALUMNI ASSOCIATION

LEGACY SCHOLARSHIP APPLICATION

scholarships @fhhsaainc.com

GENERAL INFORMATION

STUDENT'S NAME DOB

HOME ADDRESS

STUDENT'S E-MAIL

PARENT/GUARDIAN'S NAME

STUDENT'S CELL# PARENT'S CELL#

FHHS EDUCATION INFORMATION

EXPECTED GRADUATION DATE CUMULATIVE GPA

COLLEGE INFORMATION

COLLEGE/UNIVERISTY NAME

ADDRESS

EXPECTED DATE OF ENROLLMENT MAJOR

AWARDS, HONORS, and ACTIVITIES

LIST HONORS/AWARDS

LIST EXTRA-CURRICULAR ACTIVITIES

GUIDANCE COUNSELOR	
GUIDANCE COUNSELOR'S E-MAIL	
REFERENCES/RECOMMENDA	ATIONS
NAME	E-MAIL
NAME	E-MAIL
STUDENT'S SIGNATURE	
PARENT'S SIGNATURE	
GUIDANCE COUNSELOR'S SIGNAT	URE
	IDEO COMPETITION FOR ADDITIONAL INSTRUCTIONS. QUIRED TO SUBMIT A 3-5 MINUTE VIDEO.
UPLOAD YOUR LEGACY SCHOLARSHIP	VIDEO
To Submit the application, please download the Adobe Reader for Free: https://get.adobe.com/reader/	

COMMUNITY SERVICE HOURS & ACTIVITIES COMPLETED