

**Review this form to make sure you have answered all questions completely. Proofread your responses.**

**I certify that I have completed this application and that all statements are true and accurate to the best of my knowledge. I understand that a false statement could eliminate me from consideration for this scholarship.**

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Print your Legal Name:

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Applicant's Signature:

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Date Signed:

**Parent/Legal Guardian:**

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*Print Name (Parent or Legal Guardian signature required if applicant is under the age of 18.)*

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**Parent or Legal Guardian Signature:**

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Date Signed: