

SHELBY COUNTY BASS ANGLERS (SCBA)

SCHOLARSHIP APPLICATION

Please fill out completely and return to the high school counseling office.

Application is due on the date announced/posted. Print legibly.

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6 - Jin - J. J. C				
Applicant Information				
Name				
Address – Line 1				
City, State, Zip				
Academic Data	GPA:	Rank:	of	
Parent/Guardian names				
SCBA Affiliation				
Do you have any affiliat	on to the SCBA?NO	YES. If yes, pleas	e explain.	
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	y, special academic, extra-		ctivities in which are	e you, or have
been involved and descri	be your achievements in e	ach.		
Activity	Involvement			
•				
Required attachments:				
Attach a copy of you	r most recent high school t	transcript.		
	ssay describing: 1) Your car		haliava this scholard	hin will impact
		= : :	Jeneve uns scholdisi	mp will illipact
your educational future a	and ability to reach your ca	ireer godis.		