 **Glennallen School PTO Scholarship Award Application**

**Student Name:**

**Parent(s) / Guardian(s) Name:**

**Mailing Address:**

**City, State, Zip Code:**

**Home Phone:**

**Email Address:**

**Your Glennallen School Experience: (Enter Answers electronically on this form or attach separate sheet with responses)**

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**Briefly describe how you have contributed** to Glennallen School during your time as a student? (e.g. What have you done to make Glennallen school a better place?)

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What **impact has Glennallen School had on you** during the years you have been a student here?

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What skills, abilities, and accomplishments are you especially proud of as you prepare to graduate from high school?

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**Looking ahead to your future:**

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TheGlennallen School PTO Scholarship is intended to provide financial assistance for post-high school education. Briefly describe your education/training plans for next year, including why you have chosen this field of study. **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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Consider any experiences or individuals in your life that have had an impact on your decision to pursue education after high school. Briefly describe how this experience or individual influenced you.

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