



Ocean Beach Scholarship Fund

Scholarship Applicant Directions: Please complete THIS page AND the applicable page of the scholarship you are applying for then SUBMIT your application online.

Name of Applicant: _____

Address: _____

Phone: _____

(PLHS STUDENTS ONLY) Parent(s) Name(s): _____

(PLHS STUDENTS ONLY) Parent Phone: _____

Email: _____

GPA: _____

Scholarship(s) Applying For:

Community Service Scholarship

Music Scholarship (PLHS ONLY)

Math & Science (PLHS ONLY)

School you will be attending in the Fall:

Using only the space provided, please answer the following questions:

What are your career goals?

In the space below, please describe a difficult experience in your life, how you overcame the situation and how you will benefit from this scholarship?



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Community Service Scholarship Applicants Only Complete This Page

Name of Service Organization: _____

Contact Person at Organization: _____

Phone: _____ Email: _____

The person named in this application has completed _____ number of hours within the past 12 months, assisting our organization.

Brief description of volunteer's work and/or additional comments:

Signature of Contact Person Named Above

Date

Statement of Applicant

In the space below, please describe your experience performing community service, how it impacted your life as well as the people served by the organization.
