

Edith Siegrist Scholarship Fund \$1,000 Scholarships for two VHS Seniors

Applicant Name:	
Address:	
City, State, Zip:	
Phone Number: Email:	
Parent/Guardian Name:	
Parent/Guardian Phone Number:	·
Parent/Guardian Email:	
What is the name of the University, College, or Technical School you plan to	
High School honors:	
School and Community related clubs, activities and achievements:	
List high school employment:	
What person, other than your parents, had the most influence on your life? a separate piece of paper and attach it to this application. Limit essay to 300	* * *
Please attach one teacher recommendation to this application.	
Please return the completed form, essay, recommendation and a small pho Services Office by Friday, March 29, 2024 . You may attach your resume to t	-
Student Signature	Date