



I. APPLICANT INFORMATION

Applicant's Name _____

Applicants High School _____

Permanent Street Address _____

City _____ State _____ Zip _____

Home Phone # _____ Cell Phone # _____

E-mail address _____

Date of Birth _____ Expected Graduation Date _____

II. CONTINUING EDUCATION

Institution Name _____

Institution Address _____

Course of Study _____

III. REQUIRED INFORMATION

- A. One page paper on "Life" (typed, double spaced)
- B. Letter of Recommendation from each of the following:
 - 1. High School Official (where presently attending)
 - 2. An employer or volunteer organization (other than a school official)
- C. Face to Face Interview
- D. A copy of your most recent report card

IV. ADDITIONAL INFORMATION

Applications and all required information listed above is due on April 1st

I have read and understand the eligibility requirements for this scholarship for which I am applying. I certify all the information provided in this application to be complete and accurate, to the best of my knowledge and that inaccurate information will void my application. I understand that all information will be used only for the purpose of review by the Association of the Dustin Huffman Memorial Scholarship. I consent to the aforementioned association to publish my name, educational and career information and photo if I receive an award. I also understand that the decision by the aforementioned association is final.

SIGNATURE _____ DATE _____