

**WORLD CHAMPIONSHIP PUNKIN CHUNKIN
SCHOLARSHIP APPLICATION**

HIGH SCHOOL GRADUATES AND COLLEGE STUDENTS

NAME: _____		
STREET ADDRESS: _____		
CITY: _____	STATE: _____	ZIP: _____
HOME TELEPHONE: _____	DATE OF BIRTH: _____	
DATE OF APPLICATION: _____		

INSTRUCTIONS: Scholarship applications are based a scoring system, so it is important to answer all questions to the best of your ability. Supply complete addresses for your high school and college as well as your college student ID. You will need to use the address to your college financial aid office. This information is very important as this is the information the Association will use to issue a check if you are awarded a scholarship. A copy of your college transcript should be included with your application. Mail a letter of interest, the completed application, college transcript and any letters of recommendation to: World Championship Punkin Chunkin Association, P.O. Box 217, Nassau, DE 19969. Deadline is March 31.

<u>EDUCATION:</u>		
NAME OF HIGH SCHOOL ATTENDED: _____		
STREET ADDRESS: _____		
CITY: _____	STATE: _____	ZIP: _____
YEAR OF GRADUATION: _____	GPA: _____	SAT SCORE: _____
NAME OF COLLEGE YOU ARE/WILL BE ATTENDING: _____		
MAJORING IN: _____		
FINANCIAL AID OFFICE ADDRESS: _____		
CITY: _____	STATE: _____	ZIP: _____

EDUCATION CONTINUED:

TELEPHONE NUMBER OF COLLEGE: _____

CURRENT YEAR OF COLLEGE: _____ **GPA:** _____

STUDENT IDENTIFICATION NUMBER: _____

CAREER FIELD: _____

APPROXIMATE YEAR OF GRADUATION: _____

UNDERGRADUATE

GRADUATE

**ESTIMATED COST OF ONE YEAR
OF COLLEGE ATTENDANCE: \$** _____

LIST ANY SCHOLARSHIPS CURRENTLY AWARDED:

SCHOOL ACTIVITIES INCLUDING ANY OFFICES YOU MAY HAVE HELD:

ACADEMIC

AWARDS/HONORS: _____

ORGANIZATIONS YOU PARTICIPATE IN OUTSIDE OF SCHOOL:

ARE YOU EMPLOYED DURING THE SCHOOL YEAR? _____

WHERE: _____ **HOURS WORKED PER WEEK** _____

SUMMER EMPLOYMENT: _____

HOURS PER WEEK: _____

**ARE YOU A MEMBER OF THE WORLD CHAMPIONSHIP PUNKIN
CHUNKIN ASSOCIATION?** _____

WHAT TEAM: _____

DO YOU HELP WITH FIELD SET UP OR CLEAN UP: _____

**DO YOU WORK DURING THE EVENT, IF SO, WHAT DO YOU
DO:** _____

FAMILY

FATHER'S NAME: _____

ADDRESS (If different than applicant):

FATHER'S OCCUPATION: _____

MOTHER'S NAME: _____

ADDRESS (If different than applicant):

MOTHER'S OCCUPATION: _____

SIBLINGS:

NAME: _____	AGE: _____
NAME: _____	AGE: _____
NAME: _____	AGE: _____
NAME: _____	AGE: _____

The above information is true and correct to the best of my knowledge. I understand my completed application may be duplicated. If I am awarded a scholarship I authorize the World Championship Punkin Chunkin Association the right to use my name or picture in media publications.

STUDENT SIGNATURE: _____

ASSOCIATION USE ONLY

DATE REVIEWED: _____ **SCORE:** _____

AMOUNT AWARDED: _____

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