WILLIAM E. (BILLY) STULCE MEMORIAL SCHOLARSHIP APPLICATION Return to Mrs. Martin by April 10th

\$1000 Scholarship

- **You must have a minimum of a 3.00 Grade Point Average.
- **You must live in the city limits of Soddy Daisy.
- **You must not be entitled to more than two additional scholarships or grants.
- **You must be deserving and have a need as determined by the selection committee.

Name		
Street Address		City and State
Zip Code	Phone #	Birthdate
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GPA	ACT SCORE	NIDOLUMENTE CUA COL
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GPA ACCELERATED, H	IONORS, AP, AND DUAL E	

COMBINED HOUSEHOLD YEARLY INCOME:	
NUMBER OF SIBLINGS:	
NAMES OF SIBLINGS	
Special Circumstances if any:	-
Explain why or how you feel this scholarship would help you to achieve your goals.	· academic

PLEASE ATTACH A RESUME