

APPLICANT DATA

I. Personal

Name (Last/First/MI)

Home Address:

City:

State:

Zip:

Home Phone:

Home Email:

2. Academic

High School:

College/University(s) Applied To:

College/University(s) Accepted To:

Have you made a final decision regarding which college/university you will attend? If so, which one?

Have you been awarded any other scholarships? Please name:

No application will be considered unless all of the following items are submitted:

- 1. Attach a copy of your official high school transcript, including a report or grades earned through Grade 12/First Semester.
- 2. Attach an original copy of Essay, typed and double-spaced.
- 3. Attach one confidential teacher/mentor evaluation. Verify receipt of these forms by the application deadline through your school's guidance secretary.
- 4. One page summary of achievements.

DEADLINE: Applications must be submitted to the school guidance counselor by

_____.



Tropf Family Scholarships Teacher Evaluation

Please return to Guidance Dept. by _____.

Name of Teacher/Supervisor Completing This Evaluation:

Applicant Name (Last/First/MI)

1. How well do you know this applicant?

2. Please rate the student: mathematics and science ability relative to other high school students? (Please circle one):

Best this year Top 5% Top 10% Top 20% Top 50% Below Average

3. Describe the applicant's outstanding accomplishments in mathematics or science.

4. Assess the applicant's potential to complete a college/university degree in science, mathematics, engineering or related field.

6. Overall, would you rate this student in the top: () 5% - () 10% - () 15% - () 20% - () 50%