

West Region of the National Council of Corvette Clubs West Region Scholarship Applications

Fill out all items Accurately and clearly. Missing or incorrect items will delay the processing of the application. Print in ink or type.

Return all forms to:
WR Scholarship Committee
Denny Luther
830 Sandstone Pt
Waukee IA 50263

Must be RECEIVED by August 1st to be considered for WR Scholarship. If using the NCCC Scholarship Application, copy the PDF sent to NCCC and we will use that as your WR Application.

(print or Type)	First	Middle	Last		
Sex	_Female	-	N	lale	
Date of Birth Residence		Month	 i Day	 Year	
Number 8	Street	City, St	ate	Zip	
Phone # () Home		(⁄lobile)		
Country of Citizenship		A Permane	nt residence	alien number (if not a U.S. c	<u> </u>
Employer, length of employn		e hours worked per v	week if empl	oyed during the past 12 mon	 ths
Full N	ame				
Address	City	y State	Zip Code		

HIGH SCHOOL	High school g	graduation date _	/	
	Graduate's hi	gh schoolCity	<u>S</u>	tate
SAT/ACT All dates yo	ou took or will take the SAT and	or ACT SAT date(s)		
			ACT date(s)	
HIGH SCHOOL/COLLI EXTRA CURRICULAR	EGE ACTIVITIES			
HIGHER EDUCATION INSTITUTION	List all colleges, universities, of CITY AND STATE	r technical schools att DATES OF ATTENDANCE	tended or currently a CURRENTLY ATTENDING Yes INO	ttending. GPA
			☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No	
Institution which accepte	ed you	Attach letter of a	acceptance.	
NCCC AFFILIATION				
Mother	NCCC Number Date joined N			
SIGNATURE I certify th mation may result in denia	nat the information provided on t al of NCCC Scholarship.	his application is accu	urate and true. I und	erstand that falsified infor
Signature of applicant		Date		

TO BE COMPLETED BY
HIGH SCHOOL GUIDANCE COUNSELOR
All high school applicants must have this section completed by the high school guidance counselor.

HIGH SCHOOL	CEEB CODE
RANK IN CLASS	/ 6 semesters 7 semester 8 semesters school does not rank
GRADE POINT A	VERAGE/_Scale.
ACT: ACT: P-ACT:	Date V M ACH: Subj. Score Date V M R SR C Date V M R SR C Date V M R SR C Date V M R SR C
COMMENTS Info	ormation relevant to an admissions decision is requested.
SIGNATURE	Signature of counselor/Printed name Date
	High school telephone ()
IMPORTANT:	Include an official transcript of high school work through at least the junior year.
narrative evaluation	ive Evaluation: We appreciate the difficulty of evaluating a student only on the basis of ranking on a grid. Please use n. We are especially interested in information which will help us to understand those intangible qualities which so ofter essional excellence. If you prefer, feel free to attach a letter to this form.

APPLICANT ESSAY

Write a 300 word essay outlining your reasons for applying for the NCCC Scholarship and your career goals.