

# Murray Community School Foundation

Scholarship Application

**Due Date: April 1, 2025**

Applications must be received in Murray High School counselor's office by 3:30 pm.  
No late applications will be accepted.

Directions:

1. Fill in all information. Incomplete applications will not be considered.
2. Do not put your name or other identifying details on any page except Page 1.
3. Sign up in Principal's office to have principal complete and submit the Principal Form.  
You must request this form from the principal.

Applicants must be Murray Community School 2024-25 graduates. Applicant must attend post-secondary educational institution full-time to be eligible for scholarships – minimum of 12 credit hours required.

Please note: All scholarships awarded by the foundation will be paid directly to your chosen educational institution in January 2026.

---

---

## Applicant Data

**Name:** \_\_\_\_\_  
Last Name First Name

**Street:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Certification:** In submitting this application, I certify that all information provided is correct and accurate to the best of my knowledge.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

**COLLEGE DATA**

Educational institution you have chosen to attend: \_\_\_\_\_

Address of educational institution: \_\_\_\_\_

\_\_\_\_\_

Have you received a letter of acceptance?      \_\_\_ Yes    \_\_\_ No

Please select one of the following indicating the type of educational institution you will be attending:

- \_\_\_ 4-year college
- \_\_\_ 2-year college
- \_\_\_ Vocational/Technical program
- \_\_\_ Other \_\_\_\_\_  
(please specify)

Proposed major field of study: \_\_\_\_\_

**FINANCIAL INFORMATION**

Cost of one year at this educational institution:

Tuition \_\_\_\_\_

Room & Board \_\_\_\_\_

Books \_\_\_\_\_

Miscellaneous expenses

(please list)

\_\_\_\_\_

\_\_\_\_\_

**TOTAL COST** \_\_\_\_\_

**PERSONAL DATA**

**School Activities**

Activity	Years of Participation	Leadership Position Held
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Honors and Awards**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Community/Volunteer Activities:**

Activity	Years of Participation	Leadership Position Held
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Work Experience**

Activity

Dates

Position Held

---

---

---

---

---

---

---

---

---

---

---

---

What responsibility will you take in paying for your own college?

---

---

---





# Murray School Foundation Principal Form

Please give to HS principal to complete. Your application will not be accepted without this form. This form will be used for the following scholarships: Murray School Foundation Scholarships, Carolyn Crabb Scholarship, Stephenson Family Scholarship, Helen (Burchett) Newcomb Scholarship.

Student name: \_\_\_\_\_

## HIGH SCHOOL INFORMATION

Class rank: \_\_\_\_\_ in a class of \_\_\_\_\_

Cumulative Grade Point Average: \_\_\_\_\_

## HIGH SCHOOL ATTENDANCE

	-----ABSENCES-----			
	Excused	Unexcused	In School Suspension	Out of School Suspension
Freshman	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Sophomore	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Junior	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Senior	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

\_\_\_\_\_  
Principal's Signature

\_\_\_\_\_  
Date

Principal: Please complete this form and submit it by April 1, 2025.