

Gettysburg Area Personnel Association Scholarship Application

Please provide information about yourself.

Full name: _____	E-mail: _____
Permanent address: _____ _____	
Telephone: _____	Birthdate: _____
Course of Study: _____	
Resident of Adams County since: _____	
Have you previously received a GAPPA scholarship? _____	
Current student status: _____ High school senior	
_____ 1st year post-secondary	_____ 3rd year post-secondary
_____ 2nd year post-secondary	_____ 4th year post-secondary

Please provide information about your high school.

School name: _____	
Counselor name: _____	
Address: _____ _____	
Telephone: _____	E-mail: _____

Please provide information about the post-secondary educational institution to which you have been accepted or to which you are currently enrolled.

Name: _____	
Financial aid address: _____ _____	
Telephone: _____	E-mail: _____
Declared/planned major area of study: _____	# of Credits Planned per Semester: _____

Please attach a short essay (about 100 words) explaining your career plans and why you feel that Adams County is a good place for you to achieve those aspirations.

Your signature: _____ Date: _____