

SCHOLARSHIP APPLICATION
HAMILTON COUNTY REPUBLICAN WOMEN'S CLUB

Please type or print legibly. Attach additional pages if needed.

Personal Information:

Full Name _____

Address _____

City _____

Telephone W/Area Code _____ Date of Birth _____

Signature of Applicant _____ Date _____

Signature of School Counselor _____ Date _____

**Return completed application to: Lisa Elmore, P.O. Box 430, Westfield, IN 46074
or send to email address hamcogopwomen@gmail.com by March 15, 2026.**

Please attach a copy of your high school transcript.

School Information

Name of High School attending: _____

Grade Point Average: _____

Graduation Date: _____

What were your major activities and achievements in high school?

College/University attending: _____

Date of Enrollment: _____

What Major(s) and Minor (s) do you plan to pursue?

List any work experience either paid or volunteer:

What are your interests and hobbies?

What Political activities have you participated in and how were you involved?

Are you of voting age? _____ Are you registered to vote? _____

What does it mean to be a good citizen?

Name the person who has had the most influence on your life and give the reasons why:

Explain why you are seeking this scholarship and why you think you should receive this award. Include any information you believe might be of interest to the scholarship committee.

References

List three references that will attest to your good citizenship. You may attach letters of recommendation. Please do not list members of your family. Please state your relationship to your references.

Name: _____

Address: _____

City, State, Zip: _____

Telephone # or e-mail: _____

Relationship to applicant: _____

Name: _____

Address: _____

City, State, Zip: _____

Telephone # or e-mail: _____

Relationship to applicant: _____

Name: _____

Address: _____

City, State, Zip: _____

Telephone # or e-mail: _____

Relationship to applicant: _____