

Weatherly Area High School Alumni Association



WAHSAA Scholarship Application

Cover Page

Name: _____

Address: _____

Phone: _____

Email address: _____

Student ID #: _____

(Guidance Counselor will add ID#)

Applicant's Signature

Mother's Signature

Father's Signature

Signatures indicate that the information given on this application is complete and true and that the applicant fully intends to attend the chosen institution for the number of years indicated. I understand that these must be consecutive years.

Must be returned to the High School Guidance Counselor by the first week in May.