

ACQUIRED FROM DELTA TECH WEBPAGE

PRINT, COMPLETE, & MAIL ATTN: LINDA WHELCHER

DELTA TECH HIGH SCHOOL SENIOR SCHOLARSHIP DATA SHEET

Personal Information

Applicant's Name _____

Permanent Address _____

Phone Number _____ Social Security _____

DOB _____ Email Address _____

Family Information

Parent or Guardian's Name: _____

Relationship _____ Phone Number _____

Permanent Address _____

Number in applicant's family _____

Employment Information

Currently employed? _____ Part-time or Full-time _____

If yes, supervisor's name _____ phone# _____

High School Information

High School _____

Cumulative GPA _____

List clubs and organizations in which you have been a member and indicate any office held: _____

Signature of Applicant

Date

To be completed by Admissions Representative:

Name of Admissions Representative _____ Entrance Exam Score _____

Anticipated Start Date _____ Circle field of interest:

Accounting Drafting Medical I.T Business Administrative

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