



Scholarship Application Form

Northstar Shooting Sports Club

Name _____

Parent or
Guardian _____

Address _____

City _____ State ____ Zip _____ Phone _____

Date of Application _____

Field of study you plan to pursue _____

Eligibility Requirements:

1. You must be the child or grandchild of a current Northstar Shooting Sports Club Member, or they must be your legal guardian.

Northstar Member's Name _____

Your relation to them _____

2. You must be a Senior in high school who will graduate in the current school year.

Name of High School _____

City _____ State _____

Guidance Counselor or other School Contact:

Title _____

Name _____

Phone _____

3. High School Grade Point Average as of the application date _____



4. List your High School Extracurricular Activities, Honors, Awards, Club Memberships, and Volunteer Activities

5. Describe your career goal(s). Tell the committee about the type of higher education you intend to pursue.

6. Describe your involvement with the shooting sports.
