

**25<sup>th</sup> ANNUAL  
FRANKLIN B. WALTER ALL-SCHOLASTIC AWARD**

**APPLICATION FORM**

**PLEASE TYPE OR PRINT CLEARLY:** (please supply all information to the best of your ability)

Applicant's Name: \_\_\_\_\_ Phone: (    ) \_\_\_\_\_

Parent(s) Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

School District: \_\_\_\_\_

District Superintendent: \_\_\_\_\_

Superintendent Address: \_\_\_\_\_

High School: \_\_\_\_\_

High School Address: \_\_\_\_\_

High School Principal: \_\_\_\_\_

Guidance Counselor: \_\_\_\_\_

City School

Local School

Exempted Village

County \_\_\_\_\_

County Educational Service Center: \_\_\_\_\_

Future Plans: College/University attending: \_\_\_\_\_

Major: \_\_\_\_\_

**PLEASE ANSWER THE FOLLOWING ON A SEPARATE SHEET:**

**Activities:** List extracurricular or community activities including class offices held, student government activities, athletics, music and/or theater, church activities. List the specific year for each item.

**Awards:** List all awards and honors received, giving specific years and reasons for each item.

**Goals:** In 500 words or less, discuss your short-term and long-term goals, both professional and personal.

\_\_\_\_\_  
Signature of Applicant

Date: \_\_\_\_\_

**Note: Students, please return your application to your Guidance Counselor no later than \_\_\_\_\_**