

**Friends of the  
Southbury Public Library Scholarship**

(One scholarship of \$1000)

**Application Deadline: April 7, 2011**

(Eligibility: 12<sup>th</sup> grade, Southbury resident, attending college in the fall of 2011)

**Deliver completed application, high school transcript, and 1 page typed essay  
to:**

**The Career Center at Pomperaug High School (for PHS student)**

**or**

**The Reference Desk at the Southbury Public Library**

**Essay Topic: “Describe the impact of a particular book on your life.”**

**or**

**“How has the Southbury Public Library influenced you?”**

**Student Name:** \_\_\_\_\_

**Library Card #:**  
(Must be Completed) \_\_\_\_\_

**Birth Date:** \_\_\_\_\_ **Gender:** \_\_\_\_\_

**Street:** \_\_\_\_\_

**Town:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **High School:** \_\_\_\_\_

**Please note information about guardians with whom you reside:**

**Guardian's full name:**

\_\_\_\_\_  
(Please indicate relationship)

**Guardian's full name:**

\_\_\_\_\_  
(Please indicate relationship)

**\*Signatures at bottom verify all application information is true.**

**Student:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent/Guardian:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**PERSONAL INFORMATION PAGE**

(Use separate sheet if necessary, with your **Social Security #** on each page.)

\_\_\_\_ (unweighted) GPA: \_\_\_\_\_ SAT: R \_\_\_\_\_ M \_\_\_\_\_ W \_\_\_\_\_

\*\*SAT/ACT highest scores in each test ACT: E \_\_\_\_\_ M \_\_\_\_\_ Composite \_\_\_\_\_

**Academic Honors received in high school: (include year received)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PHS Extracurricular Activities (school related) (put an X in the grade box)**

Activity	9	10	11	12	Hrs/wk	# of wks	Special Involvement

**Athletic Participation (in and out of school) (put an X in the grade box)**

Sport	9	10	11	12	Special Achievement

**Community Involvement (put an X in the grade box)**

Activity	9	10	11	12	Hrs/Yr

**Work Experience**

List any job (including summer employment) you have held during the past three years.

Specific Nature of Work	Employer	Approximate Dates Of Employment	Approximate Number of Hours Spent Per Week

College/University (you are planning to attend and for which aid is requested)

\_\_\_\_\_  
SCHOOL NAME CITY STATE ZIP CODE

Intended Major: \_\_\_\_\_  
Career you plan to pursue: \_\_\_\_\_  
Have you received an acceptance? \_\_\_\_\_