THE PUBLIC AFFAIRS LUNCHEON CLUB 2023-2024 SCHOLARSHIP APPLICATION

PERSONAL INFORMATION

Name:				
Age:	Date of Birth:		Registered to Vote: _	(Y/N)
Address:			(street)	(apt. no.)
		(city)(zip)	
Phone:		(cell)		(landline)
Email:			@	
HIGH SCH	OOL:			
School Nam	e:	Address	:	
GPA (most	recent; date):			
SAT score:		ACT score:		
AP score/su	bjects:			
	ES AND ACHIEVEMEN			
CIVIC/POL	LITICAL ACTIVITIES O	or JOB (outside of sc	hool):	
Feel free to	attach additional pages if	f necessary		
SIGNATUR	·F·		DATE.	