

THE DELEGATE TOMMY WRIGHT LEGISLATIVE SCHOLARSHIP
APPLICATION FOR 2020

Name of Applicant _____
First Middle Last

SS#/or College Student ID# _____ Phone Number _____

Mailing Address _____ City _____ Zip _____

Parents/Guardian _____

Father's Occupation _____ Mother's Occupation _____

Number of dependent brothers/sisters _____ Their ages _____

Will your parent assist you in financing your college education? _____

Will you have other assistance (ex: Social Security, Grant, Scholarship) _____

Name of high school you now attend _____

Class Rank _____ of _____ GPA _____ CEEB/SAT _____

List in order of preference the Virginia colleges/universities to which you have applied for admission:
Name of Institution Accepted

_____ Yes _____ No _____

_____ Yes _____ No _____

_____ Yes _____ No _____

List school extra-curricular activities, including offices held. Attach separate sheet if needed.

Academic awards or honor. Attach separate sheet if needed.

List community activities (non-school) including offices held. Attach separate sheet if needed.

Write a paper (no more than 1 page) on "Why this scholarship is important to Me"

Return to: Mrs. Tammy Brankley Mulchi
The Delegate Tommy Wright Legislative Scholarship Committee
PO Box 1323, Victoria, Virginia 23974