**AXTELL BOOSTER CLUB SCHOLARSHIP APPLICATION:**

NAME:

SEX: MALE \_\_\_ FEMALE \_\_\_\_ DATE OF BIRTH:

MAILING ADDRESS:

TELEPHONE NUMBER:

EXTRA CURRICULAR ACTIVITES:

COMMUNITY ACTIVITIES:

NAME OF COLLEGE OR UNIVERSITY YOU PLAN ON ATTENDING:

ATTACH ESSAY DESCRIBING WHY IT’S IMPORTANT TO SUPPORT YOUR SCHOOL AND/OR COMMUNITY (1-2 PAGE LIMIT)