YUBA SUTTER BAR ASSOCIATION Donald E. Huckins Memorial Scholarship Application

Applicant Information						
Full Name:	Birthdate:					
Address:						
Phone:	Email:					
School currently attending:		Expected Graduation Date:				
What college or university do you plan to attend?		What do youplan to study?				
Participation in School and Community Organizations						
List all school and community org	ganizations in which you have particip	ated. If you	need more sp	ace, use an	attachment.	
Organization:	Date:			s of participation:		
Organization:	Dates of participation:					
Organization:	Dates of participation:					
Organization:	Dates of participation:					
Organization:		Dates of participation:				
Awards Received in High School						
List all awards you received in high school. If you need more space, use an attachment.						
Award:	Date Received:					
A	Date Received:					
Assessed				Date Received:		
Award:	Date Received:					
Award:			Date Received:			
Household Financial Information						
Number of people in your household:	Which best describes the annual income of your household?	\$30,000 or less	\$30,000 - \$60,000	\$60,000 - \$90,000	\$90,000 or more	
Signature						
I certify that my answers are true and complete to the best of my knowledge.						
Signature:	Date:					

The following must be attached to your completed application:

- 1. A written statement of financial ability of the student or his/her family and the amount of money available for the student's education from other sources.
- 2. School Transcript(s).
- 3. A written statement describing the course of study the student intends to pursue and their reasons for doing so. (Not to exceed 2 pages.)

Completed applications should be directed to: Yuba Sutter Bar Association

Attn: Scholarship

P.O. Box 204, Marysville, CA 95901