2024 National ACTRA

Scholarship Application

for ACTRA Members and/or Immediate Family Members



Return National Application to: ACTRA PO Box 190540 Boise, ID 83719

Application Deadline: Postmarked by September 15, 2024

Must include a certified copy of your High School and/or College transcript.

If selected to recieve a scholarship, you must provide proof of enrollment to receive award. Send to: ACTRA, PO Box 190540, Boise, ID 83719 or email: actranational@yahoo.com

<u> </u>	PERSONAL INFOR	MAIION					
Last Name:	First Name:	Middle:					
Permanent mailing address – number and s	treet:						
City	State	Zip Code	Zip Code				
elephone number w/ area code	Date of Birth	SSN:					
Mother's name	Mother's Employer						
ather's name	Father's Employer						
Other children living at home	Are any of them currently in colle	ege: Ages:					
List the Colleges or Universities to which y	FUTURE PLA	NS					
List the Colleges or Universities to which y What major do you plan to pursue:		NS					
	vou plan to apply:		cant				
What major do you plan to pursue:	SCHOOL ACTI	VITIES Major Office Held/ Hours/Year and Significe	cant				
What major do you plan to pursue:	SCHOOL ACTI	VITIES Major Office Held/ Hours/Year and Significe	cant				
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SPECIAL REC	CC)GI	VITI	<u></u>	1 01	R H	ON	ORS	
Special Recognition or Academic Honors or other special achievements for which singled out (e.g., Honor Society, National Science Fair, Westinghouse		SCH	OOL YEA	.R					
Science Talent Search, etc.)	9	10	11	12	Des	cription c	or what yo	ou did to earn recognitic	on:
EMPLOYMENT A	۱N	D/	OR	SU	MN	1ER	AC	CTIVITIES	
Please list each activity only once and ensure that activities									
Description of Daid Francis maget of Supposer Activities				9		OL YEAR	10	Average Hours per week worked	Weeks per
Description of Paid Employment of Summer Activities				7	10	11	12	pei week worked	year

VOLUNTEER & COMMUNITY ACTIVITIES

Organized volunteer, community or other activity not sponsored by high school (e.g. Scouts, 4-H, music, Candy Stripers, leadership in church or other	SCHOOL YEAR				Avg Hours per week	Length of Membership	Significant
community Organizations.	9	10	11	12	contributed	(in weeks)	Contributions
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EDUCATIONAL RECORD

Schools Attended (grades 9 through 12)

Name of School

Name of School

Address

Address

You must include an official High School and/or College transcript.

Be sure all materials are legible.

ESSAY
Please prepare an essay of not more than 300 words. It should summarize school and extracurricular activities and accomplishments, the applicant's goals and objectives for higher education, and how the scholarship will assist accomplishing those goals. Please utilize the space below and the back side of this page if necessary to write your essay. The essay may be either typed or hand written, but must be legible. The recipients may be asked to provide a photograph for use in publications and newspapers for announcements.

I certify that all statements in the foregoing are true and correct. Application will be disqualified if not signed.

Date___

Signature_____