



NORCOM CARES SCHOLARSHIP APPLICATION

(All the information provided is kept in strict confidence by the Scholarship Committee)

1. Name of Applicant _____ Date of birth _____

2. Home address (City, State and Zip Code)

3. Telephone # _____ Email _____

4. Name of the nominating employee and relationship to nominee:

5. Father's Name _____ Occupation _____

6. Mother's Name _____ Occupation _____

7. Name of the school you are currently attending if any _____

9. Date of graduation or scheduled graduation from current academic program _____.

10. In what area of study do you intend to major or are currently majoring? If you have definite vocational plans following graduation, please describe them below

12. Please list other hobbies or interests not covered by the previous section.



13. List any school and community activities or organizations in which you have been active, including offices or positions held and honors received.

14. Please provide a typewritten essay that is single-spaced and not more than one page long that outlines the reasons why you should be considered for this award.

All information provided is kept in strict confidence by the Scholarship Committee.

Schools/Institutions where you have been accepted:

1. _____
2. _____
3. _____

If known which school/institution you will attend? _____

Program or major course of study in which you enrolled: _____

Applicant's signature _____ Date _____