

Excellence Through Leadership Scholarship



*Presented by the Missouri Society of Association Executives
In cooperation with the Missouri Association of Student Councils*

Student Application

Please answer all of the following questions completely. This form must be typed. (Note: This scholarship must be used within six months of awarding of scholarship.)

Personal Information

Full Name _____ Social Security # _____

Address _____ Telephone # _____

City, State, Zip _____

Full Name of Parents or Guardians: _____

Father's occupation: _____ Mother's occupation: _____

Address (if different from above) _____

Telephone # (if different from above) _____

Educational Information

High School- Name, Address, City, State, Zip _____

Cumulative grade point average? _____ Class rank _____ out of _____ students.

Where do you plan to attend college? _____

Have you applied for admission? _____ Have you been accepted? _____

Proposed major? _____

Proposed minor? _____

List School Organizations/Offices Held and/or Positions of Leadership (25 points)

List Awards/Honors (10 points)

List Civic/Community Activities (15 points)

Essay: In the space provided below, tell us about a specific project which you believe showcased your leadership skills. (50 points)

Applicant's Signature _____ Date _____

Student Council Advisor's Signature _____ Date _____

Principal's Name and Address: _____
