

**APPLICATION  
THOMAS CARR HOWE ALUMNI SCHOLARSHIP**

**ELIGIBILITY REQUIREMENTS**

- (1) Student must be the child, grandchild, or great-grandchild of a HOWE graduate.
- (2) Student must be attending a Marion County high school.
- (3) Student must have at least an overall B average.
- (4) Student must be involved in extracurricular activities either in school or in the community.
- (5) Student must submit a copy of acceptance letter from a post-high school institution.
- (6) Student must submit a copy of high school transcript.

**STUDENT NAME** \_\_\_\_\_  
**ADDRESS** \_\_\_\_\_  
**PHONE NUMBER** \_\_\_\_\_  
**HIGH SCHOOL** \_\_\_\_\_  
**STUDENT GPA** \_\_\_\_\_

**EXTRA CURRICULAR ACTIVITIES AND YEARS INVOLVED** (Attach additional sheet if needed.)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**COURSE OF STUDY YOU PLAN TO TAKE**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**NAME OF HOWE GRADUATE** \_\_\_\_\_  
**YEAR OF GRADUATION** \_\_\_\_\_ **RELATIONSHIP** \_\_\_\_\_  
**ADDRESS** \_\_\_\_\_  
**PHONE NUMBER** \_\_\_\_\_

**STUDENT SIGNATURE** \_\_\_\_\_  
**DATE** \_\_\_\_\_

I verify that the above information is to the best of my knowledge correct.

**COUNSELORS SIGNATURE** \_\_\_\_\_  
**DATE** \_\_\_\_\_

Application is **due** April 1, 2010, to Dan Kaga, 8303 Woodall Dr., Indianapolis, IN 46268.  
For further information contact Dan Kaga, 872-3260. or dkaga49941@aol.com