



Agent Name Rob Thames
Agent Number 23-F191-63
Name of High School Madison Central

Application for Shelter Insurance Foundation Agents' Scholarship

This scholarship is offered only to, and the application will only be accepted from, seniors graduating from high schools sponsored by a local Shelter Insurance Agent in the Shelter Insurance Foundation Agents' Scholarship Program, which may be confirmed by your Principal or Counselor.

Section I. Information to be supplied by applicant (Please print or type)

Full Name _____
First Middle Last

Male _____ Female _____ Birth Date _____

Full Name of Parent(s) or Guardian(s) _____

Mailing Address of Parent(s) or Guardian(s) (street or route, town, county, state, zip)

E-Mail Address (print clearly or type) _____

Phone Number (include area code) _____

In the space below, briefly summarize your school and community activities. List organizations of which you are a member and offices held. (Additional information may be attached if necessary.)

What college, university, or trade school, accredited by the U.S. Department of Education, do you plan to attend? _____
(Attendance must begin no later than the September following high school graduation.)

Please list all other scholarships, awards, or financial aids for which you have applied, and of those, which have been granted for the coming school years.

<u>Name of Financial Aid</u>	<u>Value</u>	<u>Has it been granted to you?</u>
------------------------------	--------------	------------------------------------

What is your planned program of college study; what are your educational plans?

The applicant herewith consents that the Scholarship Selection Committee be fully informed as to the applicant's scholastic standing, character, and other factors having a bearing on this application.

The applicant attests that he/she is not a natural born or legally adopted child of any Shelter Insurance® employee or salaried/contracted agent.

Signature of Applicant

After you have completed your part of this application, present this to you Principal or Counselor. Your Principal or Counselor will deliver it to the Shelter Insurance Foundation Agents' Scholarship Selection Committee for consideration.

Section II. Information to be supplied by Principal or Counselor

This is to certify that the above applicant ranks _____ in a class of _____ seniors.
Date of high school graduation will be _____. The applicant has
taken the following college entrance examinations under a statewide testing program:

Name of Test

Score

Dated this _____ day of _____, _____.

Signature of Principal or Counselor

Madison Central High School

Name of High School

1417 Highland Colony Pkwy

Madison, MS 39110

Address of High School

Rob Thames

Name of Shelter Insurance® Agent

23-F191-63

Agent #