



# Student Scholarship Application Form

## Zara B. Kimmey, Bill Milliken, Aida Snow and Elaine Goldman Scholarships

Click in the highlighted fields and type your information. Be sure to print before exiting the form; you will not be able to save changes. Application must be postmarked by May 31.

### Student Information (to be completed by Student)

#### GENERAL INFORMATION

Student Name (Last, First, MI)	School Name
Home Mailing Address	School District
City, State, Zip	School City, State, Zip
Phone	School Phone
E-Mail	Teacher E-Mail
College at which You are Accepted and Plan to Attend	Name of Teacher Nominator (must be a NYSATA Member)

#### ACTIVITIES, HONORS, AWARDS

##### Involvement in the Arts Outside of Class:

##### Exhibits:

##### Honors and Awards:

##### Extracurricular Activities:

##### Hobbies and Interest other than Art:

##### Community Activities:

### Verification (to be completed by Student and NYSATA Member Teacher)

I declare the information presented in this application is true, correct, and complete.

Signature of Applicant	Date	
Signature of NYSATA Member Teacher	NSYATA Region	Date