2019 Racing Youth Scholarship ApplicationPlease print your answers. If more room is needed please add an additional page.

1.	Last Name:	First Name:
2.	Mailing Address Street: City: State: Zip:	
3.	Daytime Telephone Number: () Email Address:	
4.	Date of Birth: Month / Day/ Year Gender:	
5.	Cumulative Grade Point Average (GPA):Attach proof of GPA or GED. Your most recent school tr	(On a 4.0 scale) anscript is required.
6.	Are you the first person in your family to go to college: YES NO	
7.	List any academic honors, awards and memb	ership activities while in high school:
8.	List your hobbies, outside interests, extracurri	cular activities and school related volunteer activities:
9.	A. If you have decided on what college or voc B. If not, list your top 3 choices:	ational school you will attend, please list school name:

10.	Name & address of parent(s) or legal guardian(s): (Include address if different than your own listed in Question 2.) Name(s):		
	Street:		
	City: State: Zip:		
	Home phone of parents or legal guardians:		
	Work phone:		
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Ch a	Applications must be <u>received</u> by July 26, 2019.		
_	cklist Application		
	Essay		
	References		
	School Transcript/Proof of GED		

MAIL COMPLETED APPLICATION PACKAGE TO THE FOUNDATION TO THE ADDRESS LISTED BELOW:

The Sam Thompson Memorial Foundation c/o Laura Joiner 903 Mesa Roja Trail NE Rio Rancho, NM 87124