



## RENEWAL SCHOLARSHIP APPLICATION

1.	Last Name:	First Name, MI:
2.	Mailing Address Street: City:	State: Zip:
3.	Daytime telephone number: ( ) E-Mail address:	
4.	Date of birth: Month Day Year	
5.	Cumulative Grade Point Average (GPA): _____ (On a 4.0 scale) (Provide most recent transcript or verification from school attended)	
6.	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:	

I hereby affirm that I am a current member of the Corps, and that all the above stated information provided by me is true and correct to the best of my knowledge. I understand that that incomplete applications or applications that do not meet eligibility criteria will not be considered for this scholarship.

Signature of scholarship applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**MAIL COMPLETED APPLICATION PACKAGE TO THE MUCHACHOS INC. at:**  
**The Muchachos Inc. Scholarship Program**  
**1750 Elm St. #902**  
**Manchester, NH 03104**

The application may be scanned and E-Mailed to: [scholarship@muchachos.org](mailto:scholarship@muchachos.org)

**REMINDER:**  
**Applications must be received by the Muchachos Inc. no later than June 1 each year.**  
**There will be no exceptions!**