District Scholarship Nomination Form

This form is to be completed by an ISTA member who has a child, stepchild, grandchild or step-grandchild graduating from high school during the current school year. This is the only form that is required. Once completed, it should be returned to either the Local President or UniServ Director.

Candidate Information
Name
Street Address
City, State, Zip
Phone  Email
Gender (check one)  Male  Female
Ethnicity (check one)
☐ American Indian/Alaska Native  ☐ Multi-Racial
☐ Asian  ☐ Native Hawaiian/Pacific Islander
☐ Black/African American  ☐ White/Caucasian
☐ Hispanic/Latino  ☐ Other

Please answer all questions
(Y) (N) Is this candidate graduating from a public high school during the 2019-20 school year?

Name of High School

(Y) (N) Does this candidate maintain at least a "C" average?

(Y) (N) Will this candidate attend a formal accredited training program or accredited college/university during the 2020 Fall semester?

Name of institution candidate will attend

Nominator Information
Candidate is my (check one)  ☐ child  ☐ step child  ☐ grandchild  ☐ step grandchild

Name Phone (  )
Email Address
Local Association District Council

Signature of ISTA member Date:

Deadline
Nomination forms must be submitted to the local president or UniServ Director no later than June 1, 2020.