

DAVIS FAMILY SCHOLARSHIP APPLICATION
For School Year 2018-2019

Name: _____

Address: _____

Program of Study: _____ **Cumulative GPA** _____

Year of Study: _____ (2nd, or sophomore, etc.)

Extra-Curricular Activities: (School, Community, Church) _____

Honors and/or Awards: _____

Financial Need: _____

Complete this application and submit it by May 1 to: Davis Family Scholarship, Attn: Carol Axtman, 105 Islay Avenue, Ft. Pierre, SD 57532. The Davis Family Scholarship Committee will evaluate the scholarship applications and the recipient will be notified of the award by July 1. Funds will be sent directly to Presentation College from the Oahe Foundation when notification of registration of the student for the current year is received.

Signature of Applicant Date: _____