FORERUNNERS SCHOLARSHIP APPLICATION-2025 APPLICANT INFORMATION

Application Deadline: June 13, 2025

Name:				
Last		First	Middle	
Permanent Address:				
	Number a	nd Street		
City	State	Zip Co	de Cell Phon	e Number
Date of Birth		Email:		
Month/D	ay/Year			
Name of High School: Graduation Da		ate:		
FORERUNNER MEMBE Name:			Cell Phone Numb	er:
		City/State/Zip:		
Forerunner Chapter Af	filiation:			
COLLEGE/UNIVERSITY Will you be a full-time				
Anticipated field of stu				
-				
				MO/YR
Name of college, unive Location of School:	rsity, or trade sc	hool you plan	to attend:	

ATTACHMENTS REQUIRED

- Copy of transcript of credits completed at least thru the first semester of your senior year.
- ACT and/or SAT scores, if available.
- Copy of letter of acceptance from college, university, or trade school.

CERTIFICATION

I hereby affirm the information provided on this application is accurate and complete to the best of my knowledge. I understand this scholarship if awarded to me, is for pursuing the course of study at the college, university, post-secondary, or trade school stated on this application. I will inform the Forerunners office, in writing, of any changes in my plans before the coming school year begins. I understand this may be grounds for the reevaluation of my application.

Signature:	Date:			
	Mail the completed form along with the required attachments to			
	Helen Riendeau			
	FORERUNNERS SCHOLARSHIP CHAIR			
	6341 Highland Ridge Drive, East Lansing 48823			