

**KILE MORGAN, SR. AND DONNA WILCOX MORGAN SCHOLARSHIP FUND  
SCHOLARSHIP APPLICATION**

You may apply for this Scholarship if you are a graduating senior or graduate of Sweetwater High School, National City, California, pursuing an undergraduate degree and accepted at a 4 year college or university.

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIPCODE: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ AGE: \_\_\_\_\_ MALE:  FEMALE:

DATE OF BIRTH: \_\_\_\_\_ BIRTHPLACE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

GPA: \_\_\_\_\_ S.A.T. SCORE: \_\_\_\_\_ CLASS RANKING: \_\_\_\_\_

College Major: \_\_\_\_\_

What Colleges have you been accepted to: \_\_\_\_\_

What College you plan to attend: \_\_\_\_\_

List additional scholarships to which you have applied: \_\_\_\_\_

**FAMILY INFORMATION**

MOTHERS NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_ HOW LONG: \_\_\_\_\_

YEARLY INCOME: \$ \_\_\_\_\_

FATHERS NAME: \_\_\_\_\_

ADDRESS  
(if not the same as mother's): \_\_\_\_\_

OCCUPATION: \_\_\_\_\_ HOW LONG: \_\_\_\_\_

YEARLY INCOME: \$ \_\_\_\_\_

HOW MANY SIBLINGS: \_\_\_\_\_ AGES: \_\_\_\_\_

**TO APPLY PLEASE SUBMIT THE FOLLOWING WITH YOUR APPLICATION:**

1. HIGH SCHOOL TRANSCRIPT.
2. MOST CURRENT SAT SCORES.
3. 2 LETTERS OF RECOMMENDATION: 1 FROM A HIGH SCHOOL TEACHER WHO KNOWS YOU WELL AND 1 FROM A COMMUNITY MEMBER.
4. A BRIEF (NO MORE THAN ONE PAGE) STATEMENT OF YOUR GOALS AND WHY YOU ARE APPLYING FOR THIS SCHOLARSHIP AND YOUR INTEREST IN COMMUNITY SERVICE.
5. CURRENT PHOTOGRAPH.
6. PROOF OF ACCEPTANCE INTO AN UNDERGRADUATE PROGRAM AT A 4 YEAR COLLEGE OR UNIVERSITY.

Offered by The SUHI Foundation  
**APPLICATION DEADLINE: 6 WEEKS BEFORE GRADUATION**

Return Application form to:  
**Counseling Office  
SWEETWATER HIGH SCHOOL  
2900 Highland Avenue, National City, CA 91950**