

**REGION 15
JEANETTE ELDER
CHEERLEADING SCHOLARSHIP**

NAME _____ **SCHOOL** _____

ADDRESS _____

PHONE _____ **CELL** _____

GPA _____ **ACT COMPOSITE SCORE** _____

CLASS RANK _____ **OF** _____

WHERE DO YOU PLAN TO ATTEND COLLEGE? _____

WHAT CAREER TO YOU PLAN TO PURSUE? _____

NAME OF PARENTS _____

FATHER'S PLACE OF EMPLOYMENT _____

MOTHER'S PLACE OF EMPLOYMENT _____

TOTAL NUMBER OF FAMILY MEMBERS LIVING AT HOME _____

CHEERLEADING EXPERIENCE _____

EXTRA-CURRICULAR ACTIVITIES _____

AWARDS, HONORS, RECOGNITION _____

WORK EXPERIENCE/COMMUNITY SERVICE _____

Please attach a one page narrative explaining why you believe you are deserving of this scholarship.

Please attach a copy of your high school transcript.

Please attach a letter of recommendation from your cheerleader coach, your principal, and a community person.

Scholarship applications should be submitted BY NOVEMBER 1 to:

**Jeannie Stone
Region 15 Chairperson
122 W. Keyser Heights
Pikeville, KY 41501**