SECTION I: CONTACT INFORMATION

Name: _____

C m le e Add e /Ci /S a e/Zi : _____

Tele h ne: H me: _____ W k:_____

Email: _____ Cell: _____

SECTION II: ACADEMIC RECORDS

Name f high ch l a ended a ending: _____

Da e f g ad a i n: _____

Name f ch l( ) a ended a ending: _____

Li an academic h n ecei ed in high ch l c llege, ce held, and e ac ic la ac i i ie in

hich a ici a ed a ch l and/ in he c mm ni : _____

_____

_____

_____

_____

SECTION III: ORK E PERIENCE

Li all k e ience beginning i h c en m ecen :

Em l e : _____

Add e : _____

D ie : _____

S e i Name: _____ Ph ne:_____

Email: _____ Cell: _____

Da e f Em l men : _____

C n ac hi em l e ?: _____ Ye _____ N

Em l e : _____

Add e : _____

D ie : _____

S e i ' Name: _____ Ph ne: _____

Email: _____ Cell: _____

Da e f Em l men : _____

C n ac hi em l e ?: _____ Ye _____ N

Em l e : _____

Add e : _____

D ie : _____

S e i ' Name: _____ Ph ne: _____

Email: _____ Cell: _____

Da e f Em l men : _____

C n ac hi em l e ?: _____ Ye _____ N

Ha e ked in he im/h i ali eld ha i n li ed ab e? _____ Ye _____ N

If e , ha e f k and h man h e eek? _____

_____

Ha e e e a ici a ed in an in e n hi g am? _____ Ye _____ N

SECTION I : EDUCATION/CAREER

When d lan g ad a e? _____

C m la i g ade in a e age: _____

If ha e addi i nal ed ca i nal bjec i e, ha a e he ? _____

_____

A e a lia ed i h ind ganiai n ? If , ha a e he ? _____

_____

SECTION : ESSA REQUEST

Wha kill /in e e d ha e ha make de i e a ca ee in he h i ali ind ? H ill e and de el hem? Wh d hink h ld be a a ded ne f he $2,500 ch la hi (1-2 age e a; a ach e a a e hee ( ).)

SECTION I: SCHOLARSHIP REQUEST

A ima e i i n and fee e eme e he han den l an $ _____

A ima e b k and lie e eme e $ _____

T al: $ _____

1. Wha a f hi c ill be aid b an he ce? $ _____

2. Wha he ch la hi aid ha e a l f ha e ecei ed? $ _____

3. Am n ff nd a e e e ing f m he S . L i A ea H el A cia i n? $ _____

Sch l/P g am f hich a e a l ing f hi ch la hi : _____

_____

C n ac inf ma i n, s and h ne n mbe f he e en ial ch la hi ld be mailed:

(i.e. B a' Admi i n O ce) _____

_____

_____

Ha e ecei ed a ch la hi f m SLAHA in he a ? _____ Ye _____ N Li ea ( ) _____

SECTION II: REQUIREMENTS

I nde and all eci ien m mee he f ll ing minim m eligibili e i emen :

En lled a a f e hman, h m e, j ni eni a a f -ea in i i n
En lled a a f e hman h m e a a -ea in i i n
A lie nde g ad a e den nl
Ha e a minim m f a 2.25 e all g ade in a e age
Be a Uni ed S a e ci i en e manen U.S. e iden
I nde and ha I m be en lled f ll ime (minim m 9 h) f he ne academic ea
(b h eme e) f hich hi ch la hi i gi en in de ecei e he f ll am n f he ch la hi .

I al nde and ha :

A lica i n ill be acce ed b he A A5 Ell b a ( )-(h)4(e A)16()95 (A5 E)3n(l)1 (e)BhIm. -1.333 F-5 (l)-(

I ag ee   elea e m   an c i   and m   add e   he S . L i A ea H el A   cia i n f he   e f ecei -
ing and   e if ing hi   ch la hi   and f c n ac in   b e en ea .

_____

(Signa e)   (Da e)

H   did   lea n ab   he SLAHA ch la hi ? _____

_____

U n ecei   f a ch la hi ,   ld   be in e e ed in being c n ac ed f an in e n hi ?

_____ Ye   _____ N

U n ecei   f a ch la hi ,   ld   like   be c n ac ed b h el f em l   men   ni ie ?

_____ Ye   _____ N

U n ecei   f a ch la hi ,   ld   like   be c n ac ed 1 2 ime a eme e b a h i ali   men ?

_____ Ye   _____ N

Plea e check   a lica i n be ei ha been igned and ha all nece a   inf ma i n i c ec . D n
 bmi he a lica i n i h   all f he d c men a i n li ed bel . Re n he c m le ed a lica i n al ng
 i h he f ll ing d c men :

_____ C m le ed a lica i n

_____ T   le e f ec mmenda i n f m a f me   c en e i , efe abl f m he h el ind
       and an in c / eache

_____ C en an c i f g ade (cial an c i   efe ed)

_____ 1-2 Page e a

S bmi he c m le ed a lica i n and e e ed d c men   :   Vicki B e
                                                         E ec i e Di ec
                                                         S . L i A ea H el A   cia i n
                                                         6590B Scanlan A en e
                                                         S . L i , MO 63139
                                                         FAX: 314/558-6033

If   ha e e i n , call 314-781-5112   email vboyer@stlhotels.com