The Higdon Family Association, Inc. Scholarship Application

ACTIVITY RECORD

STUDENT _____ AGE _____ GRADE _____ DATE _____

Place an "X" in grade colum for the year of participation. Indicate office held or "M" for membership.

SCHOOL ACTIVITIES	Class Level					Class Level			
	9	10	11	12		9	10	11	12
STUDENT GOVERNMENT					OTHER EXTRA CIRICULAR ACTIVITIES				
ORGANIZATIONS					AWARDS, HONORS AND OTHER ACHIEVEMENTS				
ATHLETICS									

COMMUNITY ACTIVITIES	Class Level			
	9	10	11	12
ORGANIZATIONS				
EMPLOYMENT (state duration)				
AWARDS, HONORS AND OTHER ACHIEVEMENTS				

NOTE:
Attach separate sheet if space is not available.

_____
STUDENT SIGNATURE