

**Conway B. and Elaine W. Sonne
Scholarship Application**

PERSONAL INFORMATION

Last Name _____ First Name _____
A# _____

Current Address:
Street/Box/Apt# _____
City _____ State _____ Zip _____
Phone# _____

BACKGROUND INFORMATION

Annual gross income of family \$ _____
~~if independent, your annual income \$ _____

Number in family ____ Number in family attending college ____

Are you currently receiving any scholarships? __ Yes __ No

Are you a dependent of a USU faculty/staff member who is eligible
for half-tuition? __ Yes __ No

Major _____
GPA _____ ACT/SAT score _____

On a separate page please include a summary of your academic
recognitions, leadership involvement, community service and any other
information you feel the scholarship committee may find of interest.