

**THE COLORADO PROPANE GAS ASSOCIATION
MEMORIAL SCHOLARSHIP**

**APPLICATION FORM AND STATEMENT OF REQUIRED FACTS
for 2022-2023 ACADEMIC YEAR**

Please return to CPGA
18057 W. 78th Drive
Arvada, CO 80007 or
danbinning@hotmail.com

**Deadline: Must be returned by
June 18, 2022**

***IMPORTANT:** All enclosures shall be on standard 8 1/2" x 11" paper. (All information submitted with this Application will be used solely for the purpose of determining the applicant's eligibility to receive a COLORADO PROPANE GAS ASSOCIATION MEMORIAL SCHOLARSHIP AWARD. This is an equal opportunity award. Race, creed, sex, or national origin are not considered and no place in this applicant asked to reveal these facts.*

Name of Applicant: _____

Applicant's Address: _____
Street, Route or Box No. City/State/Zip

Telephone Number: (____) _____

Schools Attended (9th through 12th grades):

School Name: _____
City/State

If you attended more than one High School, please list same information for each in this space:

Date will graduate: _____ Number in Class: _____ Rank in Class: _____

SAT/ACT test scores, if taken: _____

Father: _____ Occupation/Employer: _____

Mother: _____ Occupation/Employer: _____

I hereby give my permission to use the information, including Grades and Test Scores, to those parties designated by the COLORADO PROPANE GAS ASSOCIATION SCHOLARSHIP for the purpose of determining my eligibility to receive a Scholarship Award.

Date _____ Signature of Applicant _____

SCHOLASTIC

Honor and Awards (state year and nature of honor or award): _____

Offices and positions of Leadership (state name of organization, position and year): _____

Member of Organization (where no office was held) (state name of organization and year, thus: Band 2,3,. State only major activities): _____

OTHER ACTIVITIES (School or non-school related)

Honors and Awards (state year and nature of honor or award): _____

Offices and positions of Leadership (state name of organization and year, thus: Drama 2,3. State only major activities): _____

Member of Organization (where no office was held - state name of organization and year, thus: Scouting, 4-H, etc. State only major activities): _____

State your plans for enrollment in a regionally accredited American College, University, or Technical School: _____

Have you been granted scholarship aid? _____ If yes, give details: _____

Any additional data to show financial need and general worthiness. Be specific in this: _____

College, University OR Technical school of my choice: _____

Anticipated cost per semester at this institution:

- Tuition _____

- Housing, Food, and Transportation (if planning to commute from home to school)

- Have you received or do you expect to receive other scholarships? _____

If yes, in what amount and from whom? _____
