

STUDENT AND PARENT STATEMENT OF INTENT

Student's Name _____

This form must be returned to the Guidance Office on or before

MONDAY, FEBRUARY 2, 2021

We have read the attached description of the Clarke Memorial Scholarship Fund and are fully aware of its provisions.

Please check one:

_____ I intend to apply for a Clarke Scholarship and will complete the FAFSA by March 19

_____ I do not intend to apply for a Clarke Scholarship

Student's Signature

Parent's Signature