

DOTTIE HUNNEWELL MEMORIAL AWARD

Name of applicant _____

Address _____

Date of Birth _____

Name of Parents or Guardian _____

Address _____

Telephone Number _____

Number of Children in Family: _____

A. Under 18 years of age _____

B. Over 18 years of age _____

C. # of children now attending college _____

Household Income of parent (1) _____

Household Income of parent (2) _____

College or University applicant desires to attend and courses she plans to pursue:

A short article by the applicant on "**What this award would mean to me**".

Signature of Applicant _____