

**2022 CCID WATER AWARENESS SCHOLARSHIP APPLICATION FORM**

**DUE: Friday, April 8, 2022 by 5:00 p.m.**

Student's Name: \_\_\_\_\_

Student's Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Father's Occupation: \_\_\_\_\_ Where Employed: \_\_\_\_\_

Mother's Occupation: \_\_\_\_\_ Where Employed: \_\_\_\_\_

High School Attending: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

Honors and Awards: \_\_\_\_\_

Offices held in class or school organizations: \_\_\_\_\_

Record of participation in extracurricular school activities: \_\_\_\_\_

Community or area services you have performed: \_\_\_\_\_

Name and relationship of family member who owns or farms in CCID or one of the other Exchange Contractors water agencies (for applicants who are graduating from high school outside the service area):

Institution you plan to attend: \_\_\_\_\_

Your major education goal and vocation: \_\_\_\_\_

Have you already made your application and been accepted to the school? \_\_\_\_\_

List of sources you contacted for information for the essay: \_\_\_\_\_

The applicant hereby authorizes high school representatives to release transcripts to the CCID Scholarship Committee if requested. Permission is granted to the Committee to publish and/or duplicate the essay submitted by the applicant, either in whole or in part.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent or Legal Guardian