

DUCKS UNLIMITED NATIONAL SCHOLARSHIP APPLICATION

Must be completed by January 15th

Personal Information:

Name:	
Address:	
City:	State: Zip:
Phone:	Email:
Parent(s) or Guardian(s) nan	ne:
Phone:	
Name and location of high so	chool:
Are you a Ducks Unlimited 1	member? 🛘 Yes 🗘 No DU member ID #:
Will you be graduating from	high school in 2018? ☐ Yes ☐ No
Cumulative Grade Point Ave	rage (GPA on a 4.0 scale):
Are you attending a vocation	al school, community college, college or university in the fall of 2018? Yes No
Have you attached your trans	script? 🗆 Yes 📵 No Have you attached letter(s) of recommendation? 🖵 Yes 🕒 No
Are you related to a current	Ducks Unlimited employee? Yes No
If yes, list the name of the en	nployee and the person's relationship to you.
Are you an active volunteer o	on a Ducks Unlimited committee at your school or in your community? Yes No
If so, please name the DU CI	napter(s):
Have you or are you current	ly serving as a DU Area Chairman/President of a committee? Yes No
If so, please list the position a	and dates of service:
Have you held any other DU	committee officer position? Yes No
If so, please list the position a	and dates of service:
College or University:	
A. If you have decided on	the college/university you will attend, please list the name of the college/university:
B. If you have not yet dec	cided on a college/university, list your top 3 college/university choices:
List any awards, personal rec	ognition, and leadership service in your community or school:

SSAY: Describe in 300 words your most memorable outdoor experience, and how that experience has impacted our view on conservation.					