

WSHS Senior Plans and Scholarship Survey 2017-18

Name: _____ Student #: _____

Have you used the ASPIRE program as a college and / or career resource? YES / NO

Please indicate your plans after high school. **Please print neatly.**

Two Year/Four Year College or University Name _____

Work: Company or type of work _____

Military: Branch _____

Other _____

What do you plan to study or train for? _____

Please list all scholarships you have received including the two years at Chemeketa (Chemeketa Scholars).

DO NOT INCLUDE GRANTS OR LOANS.

Scholarship Title _____ Amount _____

Circle one: Per Year/One-Time

Scholarship Title _____ Amount _____

Circle one: Per Year/One-Time

Scholarship Title _____ Amount _____

Circle one: Per Year/One-Time

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Circle one: Per Year/One-Time

Scholarship Title _____ Amount _____

Circle one: Per Year/One-Time

Scholarship Title _____ Amount _____

Circle one: Per Year/One-Time

Please return to Mrs. Whiteley in the Counseling Office by May 10!
If you received additional scholarships after you have turned in your form, please report them to Mrs. Whiteley in the Counseling Office.