Friends of Franklin County Public Library Annual Eileen Annie Ball Scholarship Award Application

Applicant Info	rmation:	
Name:		
Recommende	d By:	
Mailing Addre	SS:	
City, State, Zi):	
Telephone:		
will need to a the top of eac	cklist of information you will need to provide about yourself. Yetach additional information. Be sure that you include your named to sheet. The questions are given a point system, to provide for individual evaluation.	me
to inclu 2. What s during 3. Please	a narrative about your future plans and career goals. You may de a written recommendation from someone you respect. chool, community, or volunteer activities have you participated the past several years? ist any Awards/Honors/Recognition you may have received. Share your work experience.	
	ne from the committee will contact you for an informal intervi	iew.
Please Sign a	d Date:	
Applicant's Si	gnature Date	