Margaret S. Duke Scholarship Fund, Inc.
Application for Scholarship

*Full name:*_____
last *first* *middle*

*Address:*_____
street *city* *state* *zip*

*Phone:*_____ *Marital Status:*_____ *Sex:*_____ *DOB:*_____

Beginning with senior year, list all schools until the present:

School *Dates* *Academic Average* *Degree*

_____ *from* *to* _____

_____ *from* *to* _____

_____ *from* *to* _____

_____ *from* *to* _____

What is your intended degree and major program of study?
*Degree*_____ *Major program of study*_____

*Will you be a full or part-time of student?*_____

*What do you intend to do after you complete your program?*_____

_____

Number of persons dependent on family income (list by name and relationship):

_____ _____ _____

_____ _____ _____

Family's approximate income: $_____

List all scholarhips, loans or assistance programs for which you have applied for the same period of time covered by tis scholarship, including amounts sought or received: _____

_____