

C.L. & MARY E. PHELPS SCHOLARSHIP

RENEWAL FORM



Confirmation of receipt of scholarship applications are the sole responsibility of the applicant.

Student's Name: _____
Last First Middle

Home Address: _____
Street City State Zip

Current Address (If different than above): _____
Street City State Zip

Telephone No.: _____ E-Mail: _____

1. Year student graduated from Ishpeming High School: _____

2. College/University currently attending: _____

Location: _____

3. College/University that student will be attending next year: _____
(If different from current.)

4. Current Major course of study: _____

5. Anticipated graduation date: _____

6. Class level for current school year (check one):
 Freshman Sophomore
 Junior Senior
 Graduate Student **GPA:** _____

CERTIFICATION

I certify that the information given on this application is factual and correct to the best of my knowledge. If granted a C.L. Phelps Scholarship, I will use the funds for educational purposes while in attendance at the school listed above.

(Signature)

(Date)

To be eligible for consideration for a C.L. Phelps Scholarship renewal it is necessary to send a current transcript (unofficial transcripts are acceptable) of grades which includes a cumulative GPA to date (through the student's last semester) from the College, University or School to:

Superintendent's Office
Ishpeming Public School District No. 1
319 East Division Street
Ishpeming, MI 49849
(906) 485-5501

PLEASE NOTE THAT THE DEADLINE FOR RECEIPT OF BOTH THE SCHOLARSHIP APPLICATION AND TRANSCRIPTS IS MAY 1ST *

*If for some reason school is not in session on May 1st, applications and transcripts will be due no later than 8:00 a.m. on the first day school returns to open session following May 1st.

Revised: 06.13.2023