



### **TRAQ 3D Student Scholarship Application**

**Instructions:** Fill out this form as completely as possible. E-mail or bring a copy to TRAQ 3D by the last day of the month to be considered for each month's scholarship contest. We will choose a student of the month to receive a one month scholarship to TRAQ 3D Health Fitness. Extended scholarship opportunities are also available. Recipients and sponsors will be honored at a reception to be announced.

#### **Part I: Personal Information**

Name: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_

Address: \_\_\_\_\_

E-mail: \_\_\_\_\_

Phone Number: \_\_\_\_\_

By signing below, you certify that this is your own work and give TRAQ 3D permission to print or use your essay in full or in part.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent / Guardian Signature

\_\_\_\_\_  
Date

**Part II: In a few words, tell us why you would like to earn this scholarship.**