

DeSales High School
Brandon Tong Memorial Scholarship Application
Academic Year 2017-2018

Student Information:

Student Full Name _____

Preferred Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ School Last Attended _____

Parish _____

Father/Guardian Information:

Name _____

Address _____

City _____ State _____ Zip _____

Contact Phone _____

Mother/Guardian Information:

Name _____

Address _____

City _____ State _____ Zip _____

Contact Phone _____

We agree that the information provided in this application is accurate to the best of our ability.

Mother/Guardian Signature

Date

Father/Guardian Signature

Date

The questions on the back of this application are to be completed by the student applying for the Brandon Tong Memorial Scholarship.

DeSales High School
Brandon Tong Memorial Scholarship Application
Academic Year 2017 – 2018

Student Name _____

**The following questions are to be completed by the student applying for the
Brandon Tong Memorial Scholarship.**

Are you currently in a Boy Scouts of America Troop? If so, what is your Troop Number? _____

Please describe your experience with the Boy Scouts of America. _____

Do you currently experience learning difficulties in school? If so, please briefly describe how your
difficulties affect your learning. _____

Do you currently participate in regular community service activities? If so, please briefly describe your
community service activities. _____
