

Scholarship Application

Scholarship Applicant Directions: Please complete both sides of the applicable and email to info@thepeninsulaalliance.org, mail to the address below, or give to your PLHS Counselor.

Application Submission Deadline: May 3, 2024

Mail to: PLHS TPA Scholarship Application, Post Office Box 60534, San Diego, CA 92166

Name of Applicant: School you will be attending in the Fall: Address: Phone: ___ Parent(s) Name(s): GPA: Using only the space provided, please answer the following questions: What are your career goals, and how will you benefit from this scholarship? In the space below, please describe a difficult experience in your life, how you overcame the situation, and how that help you with future challenges.



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Community Service is not required to apply for this scholarship. However, The Peninsula Alliance values our community volunteers. Community service connects us all to the community by improving and making it a better place for us to live in.

Name of Service Organization:	
Contact Person at Organization:	
Phone:	
The person named in this application has completedmonths, assisting our organization.	number of hours within the past 12
Brief description of volunteer's work and/or additional comments	:
Signature of Contact Person Named Above	Date
Statement of Applicant	
In the space below, please describe your experience performing c well as the people served by the organization.	community service, how it impacted your life as