



PETALUMA FEDERATION OF TEACHERS

Application for PFT Scholarship

Student's Full Name: _____

Current School Attended: _____ Location: _____

Date of Graduation from High School _____

Home Address _____

City: _____ Zip: _____

Phone: (____) - _____ - _____

Type of school or institution you plan to attend:

Community College _____

State College/University _____

Private College/University _____

Trade/Vocational School _____

Other (specify) _____

Name of Parent _____

Position/Site _____ / _____

I _____ verify that the above is accurate to the best of my knowledge and that I am a member in good standing of the Petaluma Federation of Teachers.

Parent Signature

I verify that the above is a member in good standing of the Petaluma Federation of Teachers.

President, Petaluma Federation of Teachers