

# SHELBYVILLE HIGH SCHOOL SCHOLARSHIP CHECKLIST

**Student must complete top of form before submitting. This checklist is to be attached to each completed application. Please check the items below that are needed to complete this scholarship application.**

**STUDENT NAME** \_\_\_\_\_

**SCHOLARSHIP** \_\_\_\_\_

**DUE DATE** \_\_\_\_\_

\_\_\_\_\_ Transcript (**Must be requested at least two days prior to date the scholarship is due!**)

\_\_\_\_\_ Counselor recommendation  
(**Please request at least one week prior to date scholarship is due!**)

\_\_\_\_\_ Counselor completion of form  
(**Please request at least 2 days prior to date scholarship is due!**)

_____ Recommendation from	Date requested	Date received
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Please request teacher recommendations at least one week prior to due date!**

\_\_\_\_\_ Two stamps for all applications.  
(**YOU DO NOT NEED TO BRING AN ENVELOPE**)

\_\_\_\_\_ Application is complete

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### GUIDANCE DEPARTMENT USE ONLY

Initials	Date
_____ Application received	_____
_____ Transcript requested	_____
_____ Transcript printed	_____

Scholarship forwarded to organization \_\_\_\_\_ Scholarship given to student to mail \_\_\_\_\_