

## South Central District Scholarship Application for MASC Summer Leadership Institute

This is for a \$200 scholarship to attend the MASC Summer Leadership Institute for Middle Level, Level I, or Level II. More information about the camp can be found at [www.masc1.org](http://www.masc1.org).

The student is to complete the appropriate section and then return the application to their advisor. After completing the last section, the advisor should mail the form to:

Christy Baker  
Union High School  
P.O. Box 440  
Union, MO 63084

OR Fax to: 636-583-4203  
OR Fill out the form online and email it to  
[bakerc@union.k12.mo.us](mailto:bakerc@union.k12.mo.us)

*(If emailing the form, please also mail a hard copy with the signatures.)*

**All forms MUST be postmarked by May 15, 2010**  
Winners will be notified by May 29, 2010

### Student Section:

Name of Student \_\_\_\_\_ Age \_\_\_\_\_

Current Grade in School \_\_\_\_\_ GPA \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_

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

School \_\_\_\_\_

School Address \_\_\_\_\_

School Telephone (\_\_\_\_) \_\_\_\_\_ FAX (\_\_\_\_) \_\_\_\_\_

Advisor's Name \_\_\_\_\_

### Parent/Guardian Permission:

\_\_\_\_\_ has my permission and encouragement to attend the MASC Summer Leadership Institute if selected to receive this award. I understand the student is responsible for the remainder of camp tuition, for his/her own transportation to and from Fulton, as well as for spending money.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_



**Advisor Section:**

Describe two examples of this student's demonstrated leadership abilities that you have seen while working with this student.

Advisor's Signature \_\_\_\_\_ Date\_\_\_\_\_