Junior Auxiliary of West Point/Matt Posey Memorial Scholarship Fund APPLICATION

Name		Sex
Mailing A	Address	Telephone #
City - Sta	te - Zip Code	
Names of	f Parents or Guardians	
Will you l	be enrolled as a full-time student?	Yes No
If "no", p		
	t three (3) personal references (prov	vide names, addresses, telephone number):
2		
3		
		plied:
High Sch	ool Grade Point Average:	ACT Score:
1.	List all extracurricular activity outside of school.	ties during your high school career, both in school and
2.	A paragraph entitled, "Why a College Education is Important to Me."	
3.	A letter of recommendation for	rom a teacher.
Please re	turn your application to:	
	Oak Hill Acaden	ny Counselor by March 6, 2026