

Rhythmic Education Award

P.O. BOX 30113, Walnut Creek, CA 94598

Tel/Fax 925-459-8637

APPLICATION FORM

To be completed by all applicants. Be sure to read the attached guidelines before filling out the application.

Personal Information *(Please Print)*

Name: _____

Parent's Name: _____

Mailing Address: _____

Phone: _____ Fax _____

Email: _____

Social Security Number: _____ - _____ - _____ Birthdate: _____ - _____ - _____

USAG Number: _____

Club you are training with: _____ Level _____

Coach Name: _____

Address: _____

Education

I graduated or will graduate from high school Date: _____

I received a GED Date: _____

I took the High School Proficiency Exam Date: _____

List all high schools attended, beginning with the most recent. Attach transcripts.

Name / Address of school

Year attended

_____	_____
_____	_____
_____	_____

What school are you planning to attend next school year? (Name college you are most likely to attend.) _____

What is your intended major / Field of study? _____