

# Application for Carl L. Hossman Memorial Scholarship

LAST NAME	FIRST, MIDDLE	DATE OF BIRTH	
ADDRESS	CITY	STATE	ZIP
PHONE NUMBER	E-MAIL		
HIGH SCHOOL GPA	SAT/ACT SCORE		
HIGH SCHOOL NAME & ADDRESS	CITY	STATE	ZIP
AWARDS AND HONORS			
EXTRACURRICULAR ACTIVITIES/ATHLETICS/LEADERSHIP POSITIONS/COMMUNITY SERVICE			

**PLEASE ATTACH AN ESSAY ABOUT YOURSELF**

**Sigma Nu  
University of Washington  
1616 NE 47<sup>th</sup> St.  
Seattle, WA 98105**