

PAUL E. MITCHERONEY MEMORIAL
SCHOLARSHIP APPLICATION

Name: _____ Phone Number: _____

Address: _____

Email address: _____

Parent/Guardian 1: _____

Parent/Guardian 2: _____

Years attended Canton Public Schools: _____

School you will be attending: _____

Have you been accepted: Y/N ____

Field of Study: _____

List any extra-curricular activities and community organizations you have participated in while in high School. (You may attach a resume instead.)

Please attach the following:

- Essay, 500 words or less “What has growing up in Canton meant to you? Indicate what aspect of Canton’s history most resonates with you?”
- Official high school transcript
- A letter of recommendation may be included but is not required.

Applicant’s signature: _____ Date: _____