

**STONEWALL JACKSON MEMORIAL FUND REPAYABLE
SCHOLARSHIP APPLICATION FORM, 2017**

Please complete this form completely and accurately:

Student Name: _____
(last name) (first name) (middle name)

Home Address: _____
(Street or P. O. Box)

(City) (Zip Code)

Phone number: _____
(Area Code)

Email address: _____

Parent's name(s): _____

School name: _____

School address: _____
(Street or P. O. Box)

(City) (Zip Code)

Social Studies teacher: _____

College you plan to attend: _____

Anticipated date of enrollment: _____

Receipt of the following information no later than **Friday, April 3, 2017**:

*Completed application form

*An **original** essay of at least 1500-2500 words (**an ANNOTATED bibliography of sources is required but will not be counted in the 1500-2500 words**) on some aspect of the life of Stonewall Jackson.

To: Stonewall Jackson Memorial Fund Repayable Scholarship
PO Box 300100
Montgomery AL 36130-0100

For further information call (334) 353-3288