GFWC/Ohio Federation of Women's Clubs Supplemental Questionnaire

Name_____

Sponsoring Club_____

EXTRACURRICULAR SCHOOL ACTIVITIES (clubs, sports, music, art, drama, letters,etc.) and SCHOOL AWARDS (science projects, class offices held, honors, etc.) Use separate line for each.

	Grade			
	9	10	11	12

COMMUNITY ACTIVITIES, WORK EXPERIENCE, INTERESTS

	Grade			
	9	10	11	12

Use additional sheets if necessary.

This Supplemental Questionnaire must accompany ALL scholarship applications.