

KAY E. HARNISH MEMORIAL SCHOLARSHIP APPLICATION  
SUBVETTES/SUBVETS OF PERCH BASE

Part I APPLICANT INFORMATION

1. Name: \_\_\_\_\_
2. Address: \_\_\_\_\_  
\_\_\_\_\_
3. Phone Number: \_\_\_\_\_
4. School Name, Address & Phone Number:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. School Contact Name:  
\_\_\_\_\_

Part II SPONSOR INFORMATION

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

Submarines served on & years:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Part III EDUCATION

<u>Part III EDUCATION</u>			
Name/Address of High School Attending/Graduated:	Dates Attended:	Graduation Date/Major	Full Time?
Name/Address of College(s)/ Accredited Institution(s) Attending	Dates Attended	Graduation Date/Major	Full Time

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_