

2025-2026 Friends University

Legacy Scholarship Application Form

Biographical Information

Last Name	First Name	M.I.	Student ID Number
Address		City	State Zip
E-mail Address	Home Phone	Work Phone	Cell Phone
High School/College Attended		Cumulative GPA	Intended Major
Desired enrollment date: ☐ Fall 2024 ☐ Spring 2025			

High School Activities:

Extracurricular Activities:

Parent Information

Parent/Guardian Name	Graduation Date or Year(s) Attended Friends
Parent/Guardian Name	Graduation Date or Year(s) Attended Friends
Parent(s) Address	City State Zip