



**COOKIE SALE  
SCHOLARSHIP PROGRAM  
INITIAL APPLICATION**

Name \_\_\_\_\_ Birth Date \_\_\_\_\_ Date of Application \_\_\_\_\_  
 \_\_\_\_\_  
 First MI Last Mo/Day/Yr

Address \_\_\_\_\_  
 Number Street City Zip

Phone (\_\_\_\_) \_\_\_\_\_

Parents Name \_\_\_\_\_ / \_\_\_\_\_  
 Parent (First/Last) Parent (First/Last)

Email Girl \_\_\_\_\_ Email Parent \_\_\_\_\_

\*Needed for confirmation of boxes sold email, sent prior to each year's sale.

Troop No. \_\_\_\_\_ Service Unit \_\_\_\_\_ GS Level \_\_\_\_\_

Please indicate in what year you will **FINISH** each grade listed below:

7 <sup>th</sup> grade		10 <sup>th</sup> grade	
8 <sup>th</sup> grade		11 <sup>th</sup> grade	
9 <sup>th</sup> grade		12 <sup>th</sup> grade	

I certify that all the information I have provided is true to the best of my knowledge.

Girl Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent Acknowledgment \_\_\_\_\_ Date \_\_\_\_\_

**Mail Application by March 15<sup>th</sup> to:**

Girl Scouts Eastern Washington & Northern Idaho  
 Attn: Cookie Scholarships / Product Sales Manager  
 1404 N. Ash St.  
 Spokane, WA 99201

Only one initial application required for girl's entire participation in the program. A confirmation **email** will be sent to every applicant within her first accumulation year prior to the following years cookie sale so that each girl may plan and set goals. Upon graduation a letter of congratulations will be mailed.

