



The Doug and Debra Wright Memorial Scholarship  
Application 2026

1. Last Name \_\_\_\_\_
2. First Name \_\_\_\_\_ MI \_\_\_\_\_
3. Phone Number \_\_\_\_\_
4. Email Address \_\_\_\_\_
5. Grade Point Average \_\_\_\_\_
6. Letter of Recommendations (Attached, 3)
7. Name and address of parents or Legal guardians.  
Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_