



**DESTINATION
IMAGINATION.**



COLORADO

Applications MUST be postmarked by March 16, 2018

Name _____

Home Phone _____

Home Address _____

City _____ Zip _____

Social Security # _____

Email _____

High School _____

School Phone _____

I will graduate on _____ (date).

To which colleges/universities/trade schools/programs do you plan to apply?

Number of years of participation in Destination Imagination _____

Are you currently on a DI team? _____

Are you currently a DI volunteer? If so, what are you doing?



List the DI Team Challenges or DI volunteer activities in which you have participated over the years:

Year Challenge/Activity

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Scholarship recipients agree to the use of their names and information contained in their application packages for advertising and promotional purposes for the benefit of Colorado Extreme Creativity and the Destination Imagination program without further compensation or notification. The information on this form and contained in the application package is true and correct to the best of my knowledge.

Applicant's Signature Date

This scholarship is open to Colorado High School Seniors who have participated in Destination Imagination. Applications received incomplete or after the 03/16/18 deadline will be automatically disqualified.

Mail application to:

Destination Imagination Colorado
6000 E. Evans Ave.
Building 1
Suite 031
Denver, CO 80222