



Parker Hannifin Scholarship Application

Student's Name _____

Address _____

Phone Number _____ Email Address _____

High School you attend _____

Family Information

Father's Name _____

Mother's Name _____

Number of Siblings _____ Age of Siblings _____

Number of siblings enrolled in college _____

What college to you plan to attend?

What are your personal goals and ambitions?

Please list any scholarships or awards you have received:



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Work History

Employer _____

Employment Dates _____

Position _____

Employer _____

Employment Dates _____

Position _____

Extra-Curricular Activities

Sports Participation _____

Athletic Awards _____

Academic Awards _____

Club Involvement _____

H.S. Awards/Honors _____

Volunteer Activities _____

To apply, email this completed application with:

- High School transcript
- Letter of recommendation

to kimberly.rattray@parker.com. Or mail application and supporting documents to:
Attn: Kim Rattray, Parker Hannifin Corporation, 903 North Orange Street, Albion, IN 46701.

APPLICATION DEADLINE IS MARCH 29, 2024.