



LENNARD HIGH SCHOOL

2021 LOCAL SCHOLARSHIP APPLICATION

SCHOLARSHIP NAME _____

APPLICATIONS DUE TO MS. KELLEY NO LATER THAN February 19, 2021 at 3:00 PM

NAME: _____
LAST FIRST MIDDLE

MAILING ADDRESS _____

CITY _____ ZIP _____

STUDENT ID NUMBER _____

HOME PHONE: _____ CELL: _____ BIRTHDATE _____

E-MAIL _____

RACE ___ WHITE, NON HISPANIC ___ BLACK, NON HISPANIC ___ HISPANIC ___ NATIVE AMERICAN
___ ASIAN/PACIFIC ISLANDER ___ MULTI-RACIAL ___ OTHER GENDER: M / F (circle one)

List any health/physical challenges you have: _____

College or educational institution you plan to attend: _____

Intended college major/vocational – technical program: _____

LIST COMMUNITY SERVICE INFORMATION BELOW:

LIST CLUBS, PROGRAMS AND SPORTS ACTIVITIES:

LIST AWARDS AND ACHIEVEMENTS:

FAMILY INFORMATION

Name of **male** head of household: _____

Employer: _____ **Position:** _____

Name of **female** head of household: _____

Employer: _____ **Position:** _____

Annual Total Family Income (adjusted gross income): \$ _____

Number of Dependents Living at Home (include applicant, siblings and/or dependents): _____

Adults: _____ Children: _____ Other: _____

Grade Point Average (GPA) State (Un-weighted) _____ District (Weighted) _____

ACT Composite Score _____ **SAT** Crit. Read. _____ Math _____ Writ. _____

CPT Composite Score _____ **SAT** Composite Score _____

VERIFICATION OF APPLICATION

I certify that all information on this on this form is true to the best of my knowledge. I have read and understand the criteria of the scholarship that I am applying for, and also understand that this application only makes me eligible for consideration in the selection process. I further agree to give my permission to have my transcripts and test scores attached to my application. Should I be selected as a scholarship recipient, I agree that a copy of my application may be given to the scholarship donor and that my transcript may be reviewed. My name and photograph may be publicized as a scholarship recipient.

APPLICANT SIGNATURE

PARENT/GUARDIAN SIGNATURE

CHECKLIST:

ORIGINAL APPLICATION

Typed or hand-written. Scholarship information available on Lennard's website or on my canvas page, Lennard College and Career.

PERSONAL REFERENCES/ RECOMMENDATION LETTERS

Two (2) are required

One letter must be from a school faculty/staff member

One letter (preferred) from a community member (non-relative), such as clergy, employer, neighbor, etc.

Remember – make copies for every scholarship you are applying for and include it in your completed packet

PERSONAL STATEMENT/ESSAY

Your personal essay should be 500 words or less. Be sure to include your college and career goals, any hardships (family illness, special family situation etc...) you may have encountered and overcome, hobbies, interests, extracurricular activities, community service, and why it is important for you to receive this scholarship.

Remember- make copies for every scholarship you are applying for and include it in your completed packet.

COPY OF PERMANENT RECORD SUMMARY WORKSHEET

Please see Ms. Kelley with any questions. ☺

***NO EXCEPTIONS will be made with regards to late applications, and only complete applications will be accepted!**