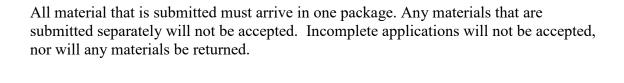
LIONS CLUB SCHOLARSHIP

APPLICATION FORM



The selection committee does not discriminate based on race, color, religion, sex, national origin, age, marital or veteran status, disabilities as defined by law, or any other legally protected status.

Name
Street Address
City, State, Zip Code
Phone Number
COLLEGE PLANS
What college will you be attending?
Expected Cost
Expected major or course of study
Career plans
What other financial assistance will you be receiving

SCHOOL ACTIVITIES

Describe your duties and years involved. Use included space or an additional sheet as necessary.

ACTIVITY/HONOR	YEARS INVOLVED AND DUTIES/RESPONSIBILITIES
S	
Student Council	
Class Officer	
National Honor Society	
School Publications	
School-Related Clubs	
School Sports Teams	
Academic Honors	
Local/National Honors	
Other Honors	

Please describe briefly your reasons for seeking higher education and why you deserve this scholarship? (Include information concerning financial need and/or extenuating circumstances.)

EMPLOYMENT HISTORY

Attach an employment history, indicating any jobs you have held outside the home for one month or longer during the last three years. Include duties and responsibilities, and the average number of hours worked per week for each job.

COMMUNITY ACTIVITIES/COMMUNITY SERVICE HISTORY

Attach a community activities/service history, indicating any volunteer work you have done in the last three years. Include duties and responsibilities, and the average number of hours volunteered per week for each project. List any awards or recognition you received.

APPLICANT'S LETTER

In an accompanying letter, briefly describe your educational and career goals and describe, in your own words, the attributes of a successful college student.

The letter shall be:

No more than two typed pages Single side Double spaced Using a font in 10 or 12 point.

REFERENCE FORM

Administrators and counselors will sign applications and attach transcripts upon submission of scholarship applications.

APPLICANT AUTHORIZATION

I certify that all statements contained herein are true and made in good faith. I understand that I am waiving the right for my parents and I to review the information provided by my reference(s). I understand that the selection of scholarship winners and the determination of the amount of the scholarship will be administered by the selection committee.

Applicant's Signature	Date

PARENT/GUARDIAN AUTHORIZATION

Name	
Street Address	
City/State/Zip Code	
Phone Number	
I authorize the release of this information and the in this application process.	participation of
Parent/Guardian Signature	Date
PRINCIPAL/COUNSELOR	AUTHORIZATION
Name	Date
I have reviewed the application and certify that the of my knowledge, the applicant has applied for acceptance institution.	
Signature	Date
CHECKLI	ST
Please ensure the following are completed and/or	enclosed:
Name Section High School Section School Activities Section Employment History Community Service History	Applicant LetterHigh School TranscriptApplicant SignatureParent/Guardian SignaturePrincipal/Counselor Signature

Winners will be notified at Academic Awards Night. The committee's decision is final.

REFERENCE FORM

To be filled out by teacher or employer and returned to the counselor.

Student's Name			Σ	Date					
Nar	Name of Reference								
Position or Title									
Relationship or Association with Student (Teacher or Employer)									
	ase evaluate this stude wledge of this studen	t and re	_	ne stud	ent. Below Average Needs Improve-	Poor	Not	your	
1.	Academic Performance								
2.	Work Performance								
3.	Is Honest								
4.	Takes Initiative								
5.	Is Cooperative								
6.	Has Positive Attitude								
7.	Uses Good Judgement								
8.	Takes Responsibility/ Is Dependable								
9.	Puts Forth Effort								
10.	Displays Perseverance								
Please make any additional comments									