

# ALBANY LIONS CLUB SCHOLARSHIP APPLICATION

Student Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Student Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Student Phone Number \_\_\_\_\_

Father's Name \_\_\_\_\_

Mother's Name \_\_\_\_\_

Father's address (if different from student)

Mother's Address (if different from student)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Select One:

\_\_\_\_\_ Academic/4 year degree

\_\_\_\_\_ Tech/Voc Non 4 year degree

**List:** College – University – Training School    Planning to attend:

\_\_\_\_\_

**PERSONAL DATA**

Describe your work experience during the past 4 years. Indicate dates of employment in each job and approximate number of hour worked each week.

Position	Date from: mo/yr.	Date to: mo/yr.	Hours per week	Amount earned

List all school activities in which you have participated during the past 4 years (e.g. student government, music, sports, etc.)  
 List all community activities in which you have participated without pay during the past 4 years (e.g. Red Cross, church work, volunteer work). Indicate all special awards, honors. If more space is needed, please use the back of this page.

Activity	No of Years Partic.	Special Awards Honors	Activity	No of Years Partic.	Special Awards Honors

Make a statement of your plans as they relate to your educational and career objectives and future goals. Use the back of this page or additional paper if more space is needed.

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Please report any unusual family or personal circumstances you feel warrant attention. Use the back of this page or additional paper if more space is needed.

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**OTHER AWARDS**

List the name and amount of any grants or scholarships that you have been awarded for the coming school year.

Name of Award	Amount	Granted	Pending

## APPLICANT APPRAISAL

Someone who knows you well, chosen from the following, should complete this section:

High school counselor or advisor, a member of the clergy, an instructor, a professional person or a supervisor.

**TO WHOM IT MAY CONCERN:** You have been asked to provide information in support of this application for financial aid. Please give immediate and serious attention to the following statements. When complete, please return to the high school counselor of the applicant's school.

The applicant's choice of a post-secondary education program is	<input type="checkbox"/> extremely appropriate	<input type="checkbox"/> very appropriate	<input type="checkbox"/> moderately appropriate	<input type="checkbox"/> inappropriate
The applicant's achievements reflect his/her ability	<input type="checkbox"/> extremely well	<input type="checkbox"/> very well	<input type="checkbox"/> moderately well	<input type="checkbox"/> not well
The applicant's ability to set realistic and attainable goals is	<input type="checkbox"/> excellent	<input type="checkbox"/> good	<input type="checkbox"/> fair	<input type="checkbox"/> poor
The quality of the applicant's commitment to school and community is	<input type="checkbox"/> excellent	<input type="checkbox"/> good	<input type="checkbox"/> fair	<input type="checkbox"/> poor
I know the applicant	<input type="checkbox"/> extremely well	<input type="checkbox"/> very well	<input type="checkbox"/> moderately well	<input type="checkbox"/> not well

Comments \_\_\_\_\_

Appraiser's Signature \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

( ) \_\_\_\_\_

Telephone number

Appraiser's Address (Street) \_\_\_\_\_

(City) \_\_\_\_\_

(State) \_\_\_\_\_

(Zip) \_\_\_\_\_

## TRANSCRIPT INFORMATION

Applicant ranks \_\_\_\_\_ in a class of \_\_\_\_\_ Cumulative grade point average \_\_\_\_\_ /4.0 scale

PSAT Verbal \_\_\_\_\_ in Math \_\_\_\_\_ SAT Verbal \_\_\_\_\_ Math \_\_\_\_\_ Writing \_\_\_\_\_

ACT Percentiles English \_\_\_\_\_ Math \_\_\_\_\_

School Officials Signature \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

( ) \_\_\_\_\_

Telephone Number

School Address (Street) \_\_\_\_\_

(City) \_\_\_\_\_

(State) \_\_\_\_\_

(Zip) \_\_\_\_\_

## APPLICATION CHECKLIST

This application for student aid becomes complete and valid only when you have returned the following material:

Application (two pages)

Current Transcript of Grades

In submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge. Falsification of information may result in termination of any scholarship granted.

Applicant's Signature \_\_\_\_\_

Date \_\_\_\_\_