LIONS INTERNATIONAL TRADING PIN CLUB YOUTH SCHOLARSHIP PROGRAM

EDUCATIONAL SCHOLARSHIP PROGRAM APPLICATION 2011-2012 ACADEMIC SCHOOL YEAR

This scholarship is intended for the children/grandchildren of Lions and/or Leo Club members. All scholarship applications must be processed through a Lions Trading Pin Club or a State/Area Scholarship Committee, and submitted to the Secretary of the Lions International Trading Pin Club.

Scholarship Eligibility: Applicant must be a graduating senior who has been accepted for admission to an accredited college or institution of higher learning.

APPLICANT: (please type or print clearly in ink)

Name		Date of Birth			
Last First Mailing Address	Middle				
Number & Street	City	State	Zip		
Permanent Address					
(If different from mailing address) Number & Street	City	State	Zip		
Phone Numbers	Email ac	Email address			
Day Evening Father's Full Name	Occup	Occupation			
Mother's Full Name	Occupa	Occupation			
Number of siblings at home	Number of si	iblings in college	:		
Estimated cost of 1 semester of school					
How do you intend to fund your education?					
What other scholarships have you applied for?)				
What other scholarships have you been offere	d?				
High School Presently Attending					
*High School G.P.A Class Rank of					

APPLICATION REQUIREMENTS:

- In 250 words or less, state your present and future goals and include your reasons for applying for this scholarship.
- In 350 words or less, describe your work experience and/or community services while attending high school and tell how your participation affected you.
- Attach recommendations from two persons (i.e., teacher, coach, clergy, employer, etc.)
- Attach a recommendation from a Lions Club member indicating the name of the Club and state in which the Club is located.

LIONS CLUBS INTERNATIONAL TRADING PIN CLUB YOUTH SCHOLARSHIP PROGRAM

EDUCATIONAL SCHOLARSHIP PROGRAM APPLICATION 2011-2012 ACADEMIC SCHOOL YEAR

Name of Applicant			
List name and address of the college a copy of the letter of acceptance if a	_	r learning you will be	attending. Attacl
Name of Institution			
Address			
Number/Street	City	State	Zip
Phone No.			
I acknowledge that the information I knowledge. I understand that any miconstitutes complete and uncondition	have provided is truth isrepresentation of the	ful, honest, and is to t information provided	the best of my d in this form
I am willing to write a brief report of request. I understand this scholarshithis use.			
Applicant's Signature		Date	
The completed application should be by March 1 for regional evaluation.	e sent to the local pin t	rading club or schola	rship committee

A scholarship in the amount of \$2,500 (US funds) will be awarded. A check in this amount will be issued payable jointly in the name of the student and the college/institution of higher learning.

This form may be copied or reproduced as needed, but alteration of application form will result in disqualification of applicant.