# Class of 2019 Scholarship Application

Dr. George Myers Memorial Scholarship

## Deadline to Apply: APRIL 2, 2019 WHAT DO I NEED TO INCLUDE????

COMPLETED APPLICATION

OFFICIAL TRANSCRIPT

PERSONAL STATEMENT

LETTERS OF RECOMMENDATION-2

FAFSA SAR REPORT

#### WHERE TO RETURN COMPLETED APPLICATION?

**ABBY LUNDY** 

**ACHIEVE CENTER** 

#### Dr. George Myers Memorial Scholarship

This award is approximately \$3,000 for a student who has been enrolled at LHS during the last two years of high school and is renewable up to three additional years provided the recipient is a full-time student, maintains a cumulative college grade point average of at least 2.8 on a 4.0 scale and submits a copy of the last semester's grade report to PNC Bank as a condition to receiving payment. Initial criteria include character, financial need, scholastic achievement, and participating in school and community activities.

#### THE FOLLOWING DOCUMENTATION IS REQUIRED AND NO APPLICATION WILL BE ACCEPTED WITHOUT IT!!

- 1. High School transcript. A minimum cumulative GPA of C is required.
- 2. A copy of the front and back of the current year tax return (1040, 1040A or 1040EZ) for the parents and students or FAFSA form.
- 3. A letter to the Scholarship Committee stating your current needs, future plans, and any information you deem necessary. List any unusual circumstances or extraordinary factors (large family, other children in college, medical expenses, etc.).
- 4. A list of school and community activities.
- 5. Two letters of recommendation one from a high school faculty member and at least one other individual, who is personally familiar with you.

### PLEASE USE A PAPER CLIP FOR THE ATTACHMENTS, DO NOT STAPLE

Deadline: Due in the ACHIEVE Center by April 2

#### **Dr. George Myers Memorial Scholarship Application**

APPLICANT NAME	
SOCIAL SECURITY NUMBER	
UNIVERSITY/COLLEGE/TECHNICAL_	
ADDRESS	
COURSE OF STUDY	·
	SIGNATURE OF APPLICANT
	DATE

Name:	Date:	
Address:	City:	Zip:
Telephone:	Date of Bi	rth:
Father's Name:		
		date:
His Annual Income:	Place of Employm	nent:
Mother's Maiden Name:		
Is your Mother living:	If deceased, give	date:
		nent:
List name and amount of grants you	have received or will rec	eive (very important)
List name and amount of scholarshi	•	, , , ,
Will you need to borrow money to a		
Do you plan on working during vaca	tion/summer break?	
Where?	Estimate your ear	rnings:
If there is a stepparent involved, ple	ase indicate their name:	
Will they contribute to school?		