

**LAWRENCE REGION ANTIQUE AUTOMOBILE CLUB OF AMERICA
SCHOLARSHIP PROGRAM**

Supplemental Application Form – Attach to high school scholarship application form and transcript. Attach additional pages as required.

All information submitted to the LRAACA Scholarship Program will be treated as private and confidential

Name of Applicant: _____

Applicant Address: _____

Applicant Phone Number (Cellphone preferred) _____

Applicant Email: _____

Parent(s) Name(s) _____

Parent Address (if different from applicant's)

Parent Phone Number (Cellphone preferred) _____

Parent Email _____

Permission: I give permission for the release of this application, my transcript, and Grade Point Average (GPA) to the LRAACA Scholarship Committee

Candidate Signature

Date

Parent Signature (If candidate under 18)

Date

PART I – Goals and Course of Study

High School: _____

Current
GPA: _____

Please Explain Your Career Goals and Intended Course of Study

Please List HS honors, awards, clubs, offices held – from 9th grade to present

Please List Non-School honors, awards, clubs, offices held, community service – from 9th grade to present

Please List Post-Secondary Schools You Desire/Plan to Attend Next Year in order of preference

Please List Any Scholarship Awards You Have Received to Date

Part II – Statement of Need (Optional)

Please Provide A Brief Statement About Your Desire to Continue Your Education

Please Provide a Brief Statement Explaining Your Circumstances and Financial Need

Please Provide Parent(s) Place of Employment and Years With Employer

Please Provide Total Family Adjusted Income From The Most Recent Tax Year
(If Parents did not file a joint tax return, please list parent's adjust gross income individually)

Please List Brothers/Sisters at home (and Grade Level if in Grade 12 or under)

Please List Grade Level of Immediate Family Members attending Post-Secondary School Next Year

Please List Summer / Part-Time Employment, Grade 9 to present, with Length of Job
