



2024 Scholarship Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I. Date

Address: _____

City State Zip Code

Phone: _____ Email _____

LAACA Member Name and Company Name: _____

Education

High School: _____ Address: _____

From: _____ To: _____ Will you graduate in 2024? YES NO GPA: _____

Reference

Please list one non-family member reference (do not forget to include reference letter with application)

Full Name: _____ Relationship: _____

Address: _____ Phone: _____

School Activities/Honors/Community Activities

School Activities (past or present): service and social organization, clubs, school publications, sports, etc.:

High School Honors:

Community Activities/Organizations/Work:

Where are you intending to study for college? What program(s) will you pursue?

Disclaimer and Signature

The above information is true and accurate. Misrepresentation will result in disqualification of the applicant.

Signature: _____

Date: _____