

ASSISTANCE LEAGUE OF FULLERTON® SCHOLARSHIP APPLICATION

Name _____ Phone _____

Address _____
Street City Zip Code

Parent/Guardian Name _____ and _____

Attended La Vista High School from _____ to _____

1. College Planning to Attend: _____
School Address _____

2. Major or Plan of Study: _____

3. The following people will write a letter of recommendation:
• Teacher/Counselor: _____
• Employer/Other: _____

4. Write two paragraphs about yourself describing the following (typed)
• Chief interests, talents, paying jobs, and your plans for the future
• Your family background and relationships

SCHOLARSHIP INFORMATION:

- Acceptance to community college or accredited trade school will be honored
- Scholarship goes towards tuition and books (proof of receipt needed)
- Scholarship due First Tuesday of May
- Applicant will be interviewed by an Assistance League of Fullerton Committee
- Scholarship Committee will pick the winner(s), and recipient will be notified at senior breakfast
- The scholarship must be used within one year of graduation from La Vista High School