

Class of 1969 LaVon Lake Memorial Education Scholarship

Name: _____ Phone: _____

Address: _____

City: _____ Zip Code: _____

Minimum GPA of 3.0 required

Overall GPA: _____ Last two terms GPA: _____ ACT: _____

1. Write an essay of no more than 300 words explaining why you should be the recipient of this TEACHING/EDUCATION scholarship and what circumstances would make this financial aid necessary to further your education.
2. List other scholarships you have applied for and indicate if you have been informed of the results of your applications. Have you been informed if you will receive a grant or other financial aid (other than loans).
3. Please describe any community service/civic involvement, leadership, club achievements etc.
4. Please attach an official transcript and a letter of recommendation from a Clearfield High School faculty member.

****Please return completed application to Mrs. Spraker by 2 p.m. on April 24, 2020.****