

KEITH LONG MEMORIAL

SCHOLARSHIP CERTIFICATE

I hereby confirm that all information contained in or attached to this application is true and correct. I further confirm that I have personally completed this application & attachments.

I understand that any false or misleading information will disqualify this application.

applicant's signature:

date:

return applications by April 12, 2024

EDDIE KEITH LONG
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325-212-7277

THE KEITH LONG MEMORIAL SCHOLARSHIP

Keith Long (1922-2013) was a teacher and coach at Lake View High School during the latter 1940's and early 1950's. Keith along with his supportive wife Posey gave leadership and inspiration to the students of that era. They remained interactive with them throughout these many years since. The LVHS Exes of the 1940's are pleased to honor them by sponsoring a scholarship in his name.

SCHOLARSHIP DESCRIPTION

All seniors graduating from LVHS SAISD planning to attend an accredited university, community college, or trade school, may apply to receive a \$500 scholarship. Selection will be made from students fulfilling the requirements for eligibility. The award will be presented at the LVHS Academic Awards Assembly in **May, 2022**. The scholarship will be payable to the establishment of choice in the recipient's name to be applied toward tuition, books, and fees. Certification of full time registration must be provided to the scholarship committee before funds can be deposited in the student's account.

REQUIREMENTS FOR ELIGIBILITY

1. Complete the application. (attach additional sheets if necessary.)
2. Attach a certified copy of your transcript.
3. Attach a letter or letters of recommendation from an unrelated adult.
(Coach, Counselor, Principal, Teacher, Pastor, etc.)
4. Attach an essay about your goals (printed or typed).
(Include how you plan to finance further education/training to reach your goals.)
5. Submit application with all attachments to the LVHS Counselors office

no later than [REDACTED] **APRIL 12, 2024**

THE KEITH LONG MEMORIAL SCHOLARSHIP APPLICATION

STUDENT INFORMATION

Name _____ Social Security # _____ - _____ - _____
() Male () Female Date of Birth ____/____/____ Phone _____ Cell _____
Address _____
(street) (city) (state) (zip code)
E-mail _____

List activities you have actively participated in at Lake View High School
(Liberal Arts, Sports, UIL events, Organizations, Achievements, Awards etc.)

Community involvement: Volunteer, Extracurricular Activities, Work, Church, etc.

Other interests, including hobbies.

Name and location of the University, College, or Trade School you plan to attend

FAMILY INFORMATION

Father's name/guardian: _____ occupation _____
Address: _____ phone: _____
Mother's name/guardian: _____ occupation _____
Address: _____ phone: _____

Annual family income: () below 40,000 () 40—50,000 () 50—60,000 () 60-70,000 () above 70,000

How many dependent children in your family (including yourself) _____ Ages _____