

# USCHMANN MEMORIAL SCHOLARSHIP

2024-25 Application for LHS SENIORS

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip Code

Email address: \_\_\_\_\_ Cumulative GPA: \_\_\_\_\_

Home phone number: \_\_\_\_\_ Cell phone number: \_\_\_\_\_

Parent/Guardian(s): \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip Code

Write a statement of your realistic goals. Include your career choice, why you chose this area, and why you feel you will be successful in it.

What have you done in high school to prepare yourself for your chosen career area?

Please list activities and interests during high school:

Please list awards and honors received:

Please list any volunteer work or activities:

Please describe any work experience you have:

How many years have you been a student at Lebanon High School? \_\_\_\_\_

What school will you attend during the 2025-26 school year?

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What are your projected costs for the 2025-26 school year?

Tuition	\$ _____
Room & Board	+ _____
Books & Supplies	+ _____
Transportation	+ _____
Personal	+ _____
Other	+ _____
TOTAL	\$ _____ (F)

**FINANCIAL INFORMATION:** (sources of income from 2024)

**Father/Stepfather/Guardian: (A)**

Name: \_\_\_\_\_ Self-employed: \_\_\_ YES \_\_\_ NO

Employer: \_\_\_\_\_

Position: \_\_\_\_\_ Gross annual income: \_\_\_\_\_

**Mother/Stepmother/Guardian: (B)**

Name: \_\_\_\_\_ Self-employed: \_\_\_ YES \_\_\_ NO

Employer: \_\_\_\_\_

Position: \_\_\_\_\_ Gross annual income: \_\_\_\_\_

**Applicant: (C)**

Employer: \_\_\_\_\_

Position: \_\_\_\_\_ Gross annual income: \_\_\_\_\_

List other sources of income and the amounts (examples: child support, social security, trust fund, etc.): **(D)**

What grants, scholarships or loans have you received for the 2025-26 school year? Please include dollar amounts: **(G and H)**

How many dependent children, including yourself, are living at home? \_\_\_\_\_

Please list their ages and school they will be attending next year:

Please explain briefly any unusual circumstances about your financial situation which you would like the committee to understand:

**FINANCIAL SUMMARY:**

Father's gross income: \$ \_\_\_\_\_ (A)

Mother's gross income: \$ \_\_\_\_\_ (B)

Applicant's gross income: \$ \_\_\_\_\_ (C)

Other income: \$ \_\_\_\_\_ (D)

**TOTAL INCOME:** A+B+C+D= \$ \_\_\_\_\_ (E)

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Projected school need: \$ \_\_\_\_\_ (F)

Grants and scholarships: \$ \_\_\_\_\_ (G)

Loans: \$ \_\_\_\_\_ (H)

**TOTAL FINANCIAL AID RECEIVED:** G+H= \$ \_\_\_\_\_ (I)

**CALCULATED NEED:** F-I= \$ \_\_\_\_\_ (J)

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The following must be attached to the application in order to be considered:

- At least two (2) current, signed letters of recommendation from people (non-family related) who are familiar with your aptitude in your chosen field.
- A statement of financial need. Please explain how you will pay for college.
- An unofficial high school transcript
- An acceptance letter from a 4 year university, community college or trade school
- An attendance record from your junior and senior school years from the attendance office

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I certify that all information given in this application is true to the best of my knowledge. Verification of all financial statements may be required. I understand that my application will not be considered if it is incomplete. I understand that my application will not be considered if I fail to show for my interview.

\_\_\_\_\_  
Student's signature \_\_\_\_\_  
Date

\_\_\_\_\_  
Father/Stepfather/Guardian's signature \_\_\_\_\_  
Date

\_\_\_\_\_  
Mother/Stepmother/Guardian's signature \_\_\_\_\_  
Date