

Canton Lehman High School Alumni Association  
**2018 SCHOLARSHIP APPLICATION**

PERSONAL INFORMATION	NAME: _____	First	M.I.	Last	Suffix
	HOME ADDRESS: _____	APT. #: _____			
	CITY/STATE/ZIP: _____				
	HOME TELEPHONE: _____	CELL PHONE: _____			
	EMAIL ADDRESS: _____				

LEHMAN ALUMNUS INFORMATION	<b>LEHMAN HIGH SCHOOL ALUMNUS (Qualifying Relative)</b>				
	<small>To be classified as a "Qualifying Relative", the sponsor must be a member of the Association and have maintained their membership for two (2) consecutive years (2017 &amp; 2018)</small>				
	LHS ALUMNUS SPONSOR (1): _____	First	M.I.	Last	
	MAIDEN NAME (if applicable): _____	YEARS ATTENDED LEHMAN: _____		From _____	to _____
	RELATIONSHIP TO APPLICANT: _____	Sponsor Eligible (To be completed by committee:)			Yes <input type="checkbox"/>
					No <input type="checkbox"/>

LEHMAN ALUMNUS INFORMATION	LHS ALUMNUS SPONSOR (2): _____				
	<small>If available, but not required</small>				
		First	M.I.	Last	
	MAIDEN NAME (if applicable): _____	YEARS ATTENDED LEHMAN: _____		From _____	to _____
	RELATIONSHIP TO APPLICANT: _____	Sponsor Eligible (To be completed by committee:)			Yes <input type="checkbox"/>
					No <input type="checkbox"/>

HIGH SCHOOL INFORMATION	<b>HIGH SCHOOL INFORMATION</b>				
	NAME OF HIGH SCHOOL: _____		CITY/STATE: _____		
	Current Status: _____ or _____	Senior	Graduated/GED	Year	Accumulative GPA: _____ on a 4.0 scale
					<small>See Guidelines #8 regarding transcript submissions and minimum GPA</small>
	<b>Extra Curricular High School Activities (attach additional sheet if needed)</b>				
<b>High School Awards and/or Honors You Have Received (attach additional sheet if needed)</b>					

**NAME OF APPLICANT:** \_\_\_\_\_

<b>POST HIGH SCHOOL INFORMATION</b>	<b>POST HIGH SCHOOL INFORMATION</b>			
	NAME OF UNIVERSITY, COLLEGE OR TRADE SCHOOL: _____		CITY/STATE: _____	
	Just Accepted *: _____	Currently Enrolled: _____	Current Grade Level: _____	Current GPA: _____
	* If just accepted, enclose a copy of acceptance letter with this application.			See Guidelines #8 regarding transcript submissions and minimum GPA
	<b>Post High School Extra Curricular Activities (attach additional sheet if needed)</b>			
	<b>Post High School Awards and/or Honors You Have Received (attach additional sheet if needed)</b>			

<b>MISCELLANEOUS</b>	Have you previously received a scholarship from the Canton Lehman High School Alumni Association?		Yes _____	Year _____	No _____
	<b>State Your Goals (attach additional sheet if needed)</b>				

<b>FAMILY INFORMATION</b>	<b>APPLICANT'S FAMILY INFORMATION</b>			
	Number of people living in your home: _____ (Include yourself plus all relatives & friends residing within your home)			
	<u>Household Income (List annual income for each family member living within your household)</u>			<u>Comments</u>
	Father:	Currently Employed _____	Annual Income _____	_____
	Mother:	Currently Employed _____	Annual Income _____	_____
	Yourself:	Currently Employed _____	Annual Income _____	_____
	Other Income:	Currently Employed _____	Annual Income _____	_____
	<b>Total Annual Household Income</b>			_____

NAME OF APPLICANT: \_\_\_\_\_

*State Why You Deserve and/or Need This Scholarship (attach additional sheet if needed)*

Applicant's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

1. *Print and complete the application, make a copy for yourself, then mail to the address below. (Be certain to sign and date after completing.)*
2. *Enclose your application along with your most current transcript (photocopy or digital print out is acceptable), completed character reference form and other attachments.*
3. *Applications received without accompanying paperwork will be considered incomplete and will not be considered until **ALL** required documentation has been received. All applications and other information must be postmarked no later than **May 1, 2018**. Applications postmarked after that date will not be considered.*

CANTON LEHMAN HIGH SCHOOL ALUMNI ASSOCIATION  
P.O. Box 351, Louisville, OH 44641

**CANTON LEHMAN HIGH SCHOOL ALUMNI ASSOCIATION**

**Character Reference Form - 2018**

*Print then request your referrer to complete in pen.*

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

Reference Name: \_\_\_\_\_ Reference Title: \_\_\_\_\_

Reference Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please check one item in each section below that best describes the characteristics of the scholarship applicant.

**MATURITY OF GOALS**

- Little interest in education
- Aims to "get by"
- Desires a good education and has fair motivation
- Above average motivation to obtain an education
- Eager to obtain an education
- No opportunity to observe

**INDUSTRY**

- Needs much prodding
- Needs occasional prodding
- Prepares assigned work
- Completes additional suggested work
- Seeks additional work
- No opportunity to observe

**SOCIAL ACCEPTABILITY**

- Avoided by others
- Tolerated
- Liked by others
- Well liked by others
- Sought by others
- No opportunity to observe

**CONCERN FOR OTHERS**

- Anti-social
- Self-centered
- Shows some interest in helping others
- Often active in helping others
- Deeply concerned about other's needs
- No opportunity to observe

**INITIATIVE**

- Needs constant supervision
- Succeeds if told what to do
- Average
- Self-reliant
- Shows leadership
- No opportunity to observe

**RESPONSIBILITY**

- Unreliable
- Somewhat dependable
- Usually dependable
- Conscientious
- Assumes much responsibility
- No opportunity to observe

**EMOTIONAL STABILITY**

- Nervous, poor self-control
- Rather poor control of feelings
- Usually well balanced
- Good self-control
- Excellent control under stress
- No opportunity to observe

