

LESPA College Scholarship
(Ludington Education Support Personnel Association)

Name _____ Date _____

Address _____ Phone _____

City _____ State _____ Zip _____

Birthdate _____

High School from which you will graduate _____

Father's Name _____ Employer _____

Occupation _____

Mother's Name _____ Employer _____

Occupation _____

Number of Dependents in Family _____

How did you know about this scholarship?

When do you plan to enter college? _____

Indicate below your 1st, 2nd, and 3rd choice of a college. Have you been accepted? Circle your correct response.

- | | | | |
|----------|-----|----|---------|
| 1. _____ | Yes | No | Not Yet |
| 2. _____ | Yes | No | Not Yet |
| 3. _____ | Yes | No | Not Yet |

How do you plan on financing your college education?

List any other scholarships/grants that you have received or applied for and enter these below with their amounts.

1. _____ Amount _____ Not Awarded Yet _____

2. _____ Amount _____ Not Awarded Yet _____

3. _____ Amount _____ Not Awarded Yet _____

4. _____ Amount _____ Not Awarded Yet _____

Include any others in the space provided below:

This application must include two (2) letters of recommendation, written and/or typed by any non-family, non-relative such as: a minister, an employer, coach, teacher, or friend (preferably one (1) letter from school personnel and one (1) letter from outside of the school). This must be firmly attached to this application or it will not be accepted.

On a separate sheet of paper, include your essay. All essays must be typed, double spaced, and include at least 200 words. Essays must be titled, "What My College Goals Are"

To remain eligible for this scholarship you must maintain at least part-time status (9 credit hours) and receive a passing grade for your classes.

It is **your** sole responsibility upon completion of the term, to send a copy of your transcript or report card within ten days of receiving it to the LESPA representative listed below.

The recipient will receive half of the amount of the scholarship before the beginning of the term. The second half of the scholarship will be awarded after the first term if the recipient maintained a passing grade and was at least a part-time student (9 credit hours).

I certify that the information in this application, to the best of my knowledge, is true and accurate.

(Full Name of Applicant)

Please complete this application and send to :
Barbara Kunsky
c/o Lakeview School
502 W. Haight
Ludington, MI 49431

Applications will not be accepted or considered after the deadline date, or if any portion of this application is missing.