## WESTERN LANE COMMUNITY FOUNDATION

## **Graduating High School or Continuing Education Scholarship Application**

Scholarships will be awarded to individuals whose permanent home address is in Florence / Dunes City or Mapleton / Swisshome /Deadwood and who are eligible to enroll in a trade school or are continuing in an institution of higher learning. The Continuing Education Scholarship also includes non-traditional students enrolling in an educational program after a career or family change or job loss.

Applicant Information				
Last Name	First N	lame		
Permanent Address (	City	Zip 974		
Phone Email .	Address			
Are you currently enrolled in a program	Yes	No		
If yes, where?				
If not, where do you plan to enroll?				
What is your current GPA?				
What is your major or program?				
Applican	t Budget			
Income				
Savings for School:	_			
Family Contribution:	_			
Other scholarships and Financial Aid Awa	rded:			
Expenditures		Total Income:		
Tuition Per Year:	-			
Books and Fees Per Year:	-			
Room and Board:				
Transportation:	-			
Other Expenses:				
	Total	Expenditures:		
Total Funds Needed:	-			

## Supplemental Information

Please address the following using the blank pages provided; multiple responses may be answered on the same page.

- 1. Extra-Curricular Activities/Hobbies
- 2. Work History
- 3. Education History
- 4. Explain your financial need and any special circumstances that would make it difficult for you to continue with your education without a scholarship.
- 5. Write an explanation of what is motivating you to apply for this scholarship (250-word minimum).
- 6. Include one (1) signed letter of reference, preferably from a member of the community.

Note: An incomplete application may not be considered.

Submit this application either by using the submit button below or email it to <a href="wlcf@wlcfonline.org">wlcf@wlcfonline.org</a>. You can digitally sign this application using the fill and sign function in Adobe Reader.

You can also mail the application to: Western Lane Community Foundation P.O. Box 1589 Florence, OR 97439

I certify that the information on this application is true and correct to the best of my knowledge as of the date given.

Signature	D	ate