## **HIGHLAND LAKES SERVICE LEAGUE**

Scholarship Comm. PO Box 1697 Marble Falls TX 78654

## SCHOLARSHIP APPLICATION

## Must be RECEIVED by April 15, 2022



| NAME:   |                          |                     |        |
|---|--------------------------|---------------------|--------|
| ADDRESS:  | CITY                     | ZIP                 | _      |
| CONTACT PHONE NO :                                  |                          |                     |        |
| EMAIL:  |                          |                     |        |
| Name & address of college, junio                    | or college, or technical | school:             |        |
|   |                          |                     |        |
| Student ID #  | (Requi                   | red)                |        |
| MAJOR COURSE OF STUDY/DEG                           | •                        |                     |        |
| PART-TIME OR FULL TIME: (Circ                       | cle one) DATE ENROLLE    | ED:                 |        |
| HOW MANY HOURS HAVE YOU (PLEASE ATTACH A COPY OF LA |                          |                     |        |
| PRIOR EDUCATION: HIGH SCHO                          | OOL NAME & CITY          |                     |        |
| DATE OF GRADUATION                                  |                          |                     |        |
| OTHER EDUCATION OR TRAINI                           | NG (ATTACH ADDITION      | IAL SHEET IF NECESS | SARY): |
|   |                          |                     |        |
|   |                          |                     |        |
| Previously received a HLSL Scho                     | olarship? Yes            | No                  |        |

| Are y | ou receiving financial aid from your employer or another source? If yes, please explain. |
|-------|--|
| Yes _ | No   |
|       |  |
| EMPL  | OYMENT HISTORY - PLEASE ATTACH RESUME  |
| Are y | ou related to a member of the Highland Lakes Service League? If so, who?                 |
| What  | is the cost of the three/four hour course you plan to take next semester?                |
| REFE  | RENCES – Name, address, phone number and e-mail of two references                        |
| (emp  | loyers, teachers, etc. – must be non-relatives):   |
| (1    | <b>\</b>   |
| (1    | .)   |
| (2    | <u> </u>   |
| (2    | 2)   |
| Answ  | ver the following with 2-3 paragraphs & attach to your application                       |
| 1     | WHY HAVE YOU SELECTED THIS MAJOR/COURSE OF STUDY?  |
| 2     | WHAT DO YOU PLAN TO DO AFTER COMPLETING THIS MAJOR/COURSE OF STUDY?                      |
|       | EMPLOYMENT GOALS?  |
| 3     | OTHER INFORMATION YOU WOULD LIKE TO SHARE WITH THE SELECTION COMMITTEE                   |
| SIGN  | ATURE: DATE:   |

Please mail application and attachments to:
Highland Lakes Service League
Attn: Scholarship Comm.
PO Box 1697
Marble Falls TX 78654