SCHOLARSHIP
APPLICATION

PERSONAL

First: _____ Middle: _____

Last: _____ DOB: _____/_____/_____

ADDRESS AND CONTACT

Address: _____

_____

City: _____ State: _____ ZIP: _____

Home/Cell Phone: (_____) _____–_____

Email: _____

EDUCATION

High School Attended: _____

Graduation Date: _____/_____/_____ GPA: _____ ACT/SAT Score: _____

Guidance Counselor: _____

School Phone: (_____) _____–_____

Did you apply for Pell Grant or Financial Aid? YES O NO O

HIGHER EDUCATION

What Technical School/College/University do you plan to attend?

_____

Program Term: 1 YEAR O 2 YEAR O 4 YEAR O

As a student, do you plan to live on campus? YES O NO O

As a student, where do you plan to study? IN-STATE O OUT-OF-STATE O

ACTIVITIES, AWARDS, HONORS

List all school activities in which you have participated during the past four years, such as student government, sports, music, etc. List all community activities in which you have participated without pay during the past four years such as volunteer work, Special Olympics, etc. Indicate all awards, honors and offices held and/or received.

GOALS AND ASPIRATIONS

Make a statement of your plans as they relate to your educational and career objectives and future goals.

REFERENCES

Please list three references with at least one of them being a teacher at your current school.

Full Name: _____

Occupation: _____

Work/Cell Phone: (_____) _____–_____

Address: _____

_____

City: _____ State: _____ ZIP: _____

• • •

Full Name: _____

Occupation: _____

Work/Cell Phone: (_____) _____–_____

Address: _____

_____

City: _____ State: _____ ZIP: _____

• • •

Full Name: _____

Occupation: _____

Work/Cell Phone: (_____) _____–_____

Address: _____

_____

City: _____ State: _____ ZIP: _____

All applications must be postmarked no later than Friday, March 15, 2019.
Submit your completed application to:

LITTLE GENERAL STORES, INC. SCHOLARSHIP PROGRAM
ATTENTION: MINDY PACK
P.O. BOX 968, BECKLEY, WV 25802