SPRINGFIELD LAKESHORE IMPROVEMENT ASSOCIATION SCHOLARSHIP APPLICATION

Return this completed form and ALL required attachments to:

Springfield Lake Shore Improvement Association, Scholarship Program P.O. Box 4132, Springfield, IL 62708 www.lakespringfield.us

Date of Application:	Postmark Deadline: April 15, 2024
1. Personal Information	
Full Name:	Date of Birth:
Address	Phone number:
Email Address:	
Name and Address of Parent or Legal Guardian:	
2. College Plans Name of college/university you plan to attend:	
 3. References List at least <u>two</u> references Provide a letter of recommendation from each support who are not related to you by birth or marriage. 	porting your application. References must be from individuals
1. Name:	Phone number:
Association/relationship:	
2. Name:	Phone number:
Association/relationship:	
4. Written Statement Submit an essay (not over 500 words) on: " What Lak on the Springfield Lake Shore Improvement Association	e Springfield Means to Me" (Winning essays will be posted on website).
5. Transcript and List of Community Service and Extra Submit an official copy of your high school transcript. activities with your application.	a-Curricular Activities Include a list of all extra-curricular and community service
By signing this form, I acknowledge that I am a gradua four-year college or university in the fall of 2024.	ting senior in high school and will be attending a two- or
Signed:	Date:

Parent or Legal Guardian: Date: _____ Date: _____

Submitted materials remain the property of SLSIA for their use.