

Utica LaSertoma Sarah Shomaker Scholar Grant

and the

Utica LaSertoma Evelyn Lewis Scholar Grant

Amount of awards: \$1,000 each

Utica LaSertoma again will be offering two scholar grants in the amount of \$1000.00 each. The Sarah Shomaker award and the Evelyn Lewis award will be given to students exhibiting scholarship as well s community service and need. The application of the winner of the Sarah Shomaker grant will be forwarded to the LaSertoma International Scholarship Committee for consideration for one of their \$1000.00 scholarships. Winners of the Utica LaSertoma awards will be notified during awards night at Utica High School.

Please be aware that these grants are not based on grade point average only. Scholarships, community service, and need will be considered when determining the winners.

Any North Fork graduating senior entering college or any student completing work on a graduate degree Is eligible to apply. Relatives of LaSertoma, Sertoma or the LaSertoma Volunteers are not eligible for the Sarah Shomaker award, but are eligible for the Evelyn Lewis award.

Applications must include:

- Scholarship & Memorial fund grant application (LSI Form C-7).
- Financial Statement (LSI Form C-6). Please note at the bottom of the financial statement C-6, additional financial information is needed.
- Copy of the most recent available transcript of grades.

All applications must be returned to the guidance office by April 11th

Checks are presented to the students only after confirmation that the students have successfully enrolled in an institution of higher learning.

Names of the Utica LaSertoma Scholar Grant winners will be inscribed on plaques in the high school office. If successful, the name of the International Scholarship Grant winner will be inscribed on a plaque at the Utica Depot Community Center.

For any questions, call 740.745.2327

LASERTOMA INTERNATIONAL
SCHOLARSHIP AND MEMORIAL FUND GRANT APPLICATION

(To be completed in English by applicant using space provided on this form.)

NAME OF APPLICANT _____ TELEPHONE (____) _____

E-MAIL _____ PERMANENT ADDRESS _____

STATUS OF EDUCATION: _____ UNDERGRADUATE _____ GRADUATE

INDICATE SPECIAL INTERESTS:

FUTURE EDUCATION PROGRAM:

HIGHEST EDUCATION RECEIVED TO DATE:

NAME OF SCHOOL _____

PERIOD OF ENROLLMENT _____ TO _____

DEGREE/YEAR COMPLETED _____ MAJOR _____

LIST COMMUNITY AND SCHOOL SERVICE ACTIVITIES:

PLEASE ENCLOSE OFFICIAL TRANSCRIPT OF GRADES, LASERTOMA INTERNATIONAL FINANCIAL STATEMENT (C6) AND PAGES 1 & 2 OF IRS 1040 FOR STUDENT & PARENTS OR COMPLETED FREE APPLICATION FOR FEDERAL STUDENT AID FORM (FAFSA). IF A RESIDENT OUTSIDE US, SEND APPROPRIATE FINANCIAL DOCUMENTATION.

DATE _____ SIGNATURE OF APPLICANT _____

LASERTOMA INTERNATIONAL

FINANCIAL STATEMENT

Scholarship & Memorial _____ Rose Runzler _____ Marguerite C. Leander _____ McKinney _____
(Please check the program for which you are applying)

NAME OF APPLICANT _____

To be completed in English by the applicant in US Dollars. If you are a dependent student, complete parts I, II, III, & IV. If you are an independent student, complete parts II, III, & IV.

I. Household Information:

Parents' adjusted gross income (annual) \$ _____

Number of family members _____

Number of family members attending college
next school year (including applicant) _____

Outstanding debts:

Mortgage: \$ _____

Medical: \$ _____

Other: \$ _____

II. Student Information:

Income earned this year \$ _____

Anticipated income while attending college \$ _____

Other Scholarships and Grants \$ _____

III. List anticipated college expenses:

Tuition \$ _____

Room & Board \$ _____

Books and Supplies \$ _____

Miscellaneous Expenses \$ _____

IV. Explain unusual circumstances pertinent to financial need:

In addition to this form, please include pages 1 & 2 of IRS 1040 for student & parents, or a copy of the completed Free Application for Federal Student Aid form (FAFSA). (If a resident outside the US, please send appropriate financial documentation, i.e., Canada Revenue Agency T1 with attachments, or the Canada Revenue Agency Notice of Assessment.

Date _____ Signature of Applicant _____ Email _____