

Application Form
FINANCIAL AID GRANT

Sponsored by

Lyle Education Association

Application must be returned to the office by May 1st.

Application of _____
Last Name First Middle

Home Address _____
Street City State Zip

Age Last Birthday _____ Date of Birth _____ Place of Birth _____

High School _____ Year of Graduation _____

Parents' Name _____

Address (if different) _____

Occupation of Father _____ Annual Income _____

Occupation of Mother _____ Annual Income _____

Number of dependent children in family _____

Grade levels of children (under 18) _____

Over 18 _____

PLEASE ANSWER CAREFULLY

1. What is your educational objective? _____

2. What field of study are you planning to take? _____

3. List your vocational preferences

A. _____ B. _____ C. _____

4. List activities in which you have participated both in and out of school

Grade 9

Grade 10

Grade 11

Grade 12

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

5. Enumerate any outstanding achievements in music, speech, science, sports, or other areas

6. What other honors, prizes, or special recognitions have you received in high school? (Include both school and community recognition.)

7. Why are you deserving of this scholarship?

8. Date _____

Signature _____