

APPLICATION FOR MICHIGAN LONGBOW ASSOCATION SCHOLARSHIP

Name:		Age:	
Address:		Date of Birth:	
		Telephone #:	
City:	Zip:		
High School:		Date of Graduation:	
College/University you	will be attending:		
Parents:			
Proposed Curricula (if d	ecided)		
Do you plan to attend fo	ull time?		
If part-time, how many	hours?		
Have you applied for ot	her scholarships or financial aic	1? Yes No	
If yes, from what source	es?		
Will the receipt of the N	•	scholarship jeopardize the receipt of other sch	nolarships?
References – include tw	vo (2) letters of reference, exclu	ding relative	
Write,(type or print) in	200 words or less why you feel	that you are a deserving candidate for the MI	A scholarship.
Include an official High	School Academic Transcript		
A Personal interview ma	ay be requested.		
Please list your extracur	ricular activities during High Sc	hool. (Please use a separate sheet if necessar	ry).
School	Church	Community (including MLA)	
Please list awards receiv			
		Community (including MLA)	

I certify that the information contained in this application is correct to the best of my knowledge and understand that deliberate falsification of this information is grounds for disqualifications. I am aware that this information is to be used in considering my application for a scholarship to continue my educations. I authorize the references given to you to give all pertinent information concerning me that may have personal or otherwise. I also agree you may utilize any information in my permanent school record when considering this application. I hereby release all parties form all liability for any damage that may result from furnishing same to you.

Applicant's Signature:	Date:
Parent's Signature:	
Please enclose a senior picture	