

REQUIREMENTS FOR THE LOYALL HIGH SCHOOL ALUMNI ASSOCIATION SCHOLARSHIP

The value of the one-time scholarship is \$1,000.

The applicant must be a high school senior and a resident of the old Loyall High School District, which includes the areas from Tremont to Baxter and from Laden Trail to Bledsoe , (This includes Rosspoint and Straight Creek to the Bell County line,) and/or a close relative of former students of Loyall High School.

The scholarship is to be based on character, scholastic achievement, and financial need.

Two reference letters are to be submitted. (One could be from your minister.)

Include an official transcript, which includes your GPA and Class Rank. (Be certain you place your ACT Score, GPA, and Class Rank on your Application Form.)

Include a copy of your ACT STUDENT DATA FORM

Include a one-page essay concerning family background, reasons for wanting to attend college, and goals for after college. If members of your immediate family are a Loyall High School graduate, attended Loyall High School, Junior High, or Elementary, please tell us about him/her, and if possible, include the year or years they attended)

The scholarship will be paid to the college or university of your choice and will be applied toward your tuition or room and board. The check will not be made payable to the recipient. Each recipient will be responsible for procuring his/her Student ID Number from the institution in which he/she is enrolled and the address and phone number of the institution. Kenneth must have this information before he sends payment to the school.

Place the Application Form plus the other aforementioned requirements in a manila envelope and mail them to the Chairman of the Loyall High School Alumni Association Committee, Kenneth Farley, 192 Noelle Lane, East Bernstadt, KY 40729. Please adhere closely to the above requirements.

Applications must be received by April 15.

LOYALL HIGH SCHOOL ALUMNI SCHOLARSHIP APPLICATION

2022-23 SCHOOL YEAR

NAME _____ DATE _____

ADDRESS _____ PHONE NO. _____
Street or PO No. City State Zip

FATHER'S NAME _____ OCCUPATION _____

MOTHER'S NAME _____ OCCUPATION _____

NUMBER OF CHILDREN SUPPORTED BY THE HOME _____ NUMBER OF CHILDREN IN COLLEGE _____

DO YOU HAVE OTHER SOURCES OF INCOME FOR COLLEGE? YES NO (Circle One)

Scholarships _____ Annual Amount _____

Work Grants _____ Annual Amount _____

Other Income _____ Annual Amount _____

UNIVERSITY OR COLLEGE YOU PLAN TO ATTEND _____

_____ Address _____ Bursar's Phone No. _____

DEGREE YOU PLAN TO PURSUE _____

EXPLAIN ANY UNUSUAL CIRCUMSTANCE CONTRIBUTING TO THE NEED OF THIS SCHOLARSHIP _____

CAREER GOALS AND OBJECTIVES _____

ACT SCORE _____ CLASS RANK _____ GPA _____

NAMES AND PHONE NUMBERS OF TWO REFERENCES _____
