



# LOUISIANA GARDEN CLUB FEDERATION, INC.

## APPLICATION FOR SCHOLARSHIP

Use this application form for all LGCF scholarships.

1. Name in full \_\_\_\_\_
2. Home Address \_\_\_\_\_  
(Street Address, City, State, Zip)  
\_\_\_\_\_  
(Phone, email)
3. School Address \_\_\_\_\_  
(Street Address, City, State, Zip)  
\_\_\_\_\_  
(Phone, email)
4. Place and Date of Birth \_\_\_\_\_
5. Male  Female  Single  Married
6. Are you a permanent resident of Louisiana? No  Yes  Parish \_\_\_\_\_
7. College/University \_\_\_\_\_  
Curriculum (Major) \_\_\_\_\_
8. Classification: Junior  Senior  Post Graduate
9. Last two schools attended:  
1) \_\_\_\_\_  
2) \_\_\_\_\_
10. List of extracurricular activities: \_\_\_\_\_  
\_\_\_\_\_
11. Financial Statement – see next page
12. References (letters from references are to be attached to application)
  - 1) Department Head Name \_\_\_\_\_  
Address \_\_\_\_\_
  - 2) Professor Name \_\_\_\_\_  
Address \_\_\_\_\_
  - 3) Other Name \_\_\_\_\_  
Address \_\_\_\_\_
13. Photograph (head shot) of applicant (to accompany application)

**FINANCIAL STATEMENT (Must accompany application)**

(All Categories)

**Student Information:**

1. Student's annual earnings: \_\_\_\_\_
2. Hours worked during academic year: \_\_\_\_\_
3. Spouse's contribution, if applicable: \_\_\_\_\_
4. Other income or assets: \_\_\_\_\_
5. Financial assistance from parents: \_\_\_\_\_
6. Other financial help: \_\_\_\_\_
7. How has education been financed up to present time?  
\_\_\_\_\_
8. Parent's Name: \_\_\_\_\_
9. Parent's Occupation: \_\_\_\_\_
10. \*\*\*Parent's address & phone number: \_\_\_\_\_  
\_\_\_\_\_
11. Any unusual circumstances affection need for scholarship:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**\*\*\* Information needed if student has to be contacted during the summer, etc.**

**RETURN BY April 1<sup>ST</sup> TO:**

**Dr. Pam Langley  
1750 Bilbo Street  
Lake Charles, LA 70601-6061  
LGCScholarships@gmail.com**