

Laveen Community Council
2019 Scholarship Application Form

Deadline: April 1, 2019 -- Please print!



Name: _____ Date of Birth: _____

Student ID Number: _____ Graduation Date: _____

Address: _____

Phone Number: (_____) _____ Email: _____

Name of High School: _____

Community Involvement:

List no more than five Volunteer Opportunities

	Organization	Role	Dates Participated	Supervisor
1	_____	_____	_____	_____
2	_____	_____	_____	_____
3	_____	_____	_____	_____
4	_____	_____	_____	_____
5	_____	_____	_____	_____

Extracurricular School Activities:

List no more than five Activities

	Activity	Role	Dates Participated	Advisor
1	_____	_____	_____	_____
2	_____	_____	_____	_____
3	_____	_____	_____	_____
4	_____	_____	_____	_____
5	_____	_____	_____	_____

Counselor Name (Please print): _____

School Phone Number: (_____) _____ Ext: _____

Counselor Signature: _____ Date: _____

Student Signature: _____ Date: _____