

APPLICATION FORM

LIONS CLUBS DISTRICT 35 0 YOUTH EXCHANGE SCHOLARSHIP

(A PROGRAM FOR SENIOR CLASS HIGH SCHOOL STUDENTS IN LIONS DISTRICT 35 0)

DEAR APPLICANT: This Scholarship was created by the Lions Clubs of District 35 0 to establish a suitable Memorial to commemorate the untimely death of Paivi Harittu, from Paimio, Finland. Miss Harittu, a Youth Exchange student traveling under the auspices of Lions Clubs International Youth Exchange Program, lost her life in a tragic automobile accident in Orlando on the evening of July 4, 1983. Scholarships are for \$1,000. They will be presented to outstanding students and may be used for educational purposes or other educational travel.

THE DEADLINE FOR SUBMITTING THIS APPLICATION IS FRIDAY, FEBRUARY 14, 2020.

PRINT IN INK ONLY – INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.

PERSONAL INFORMATION

NAME: _____ DATE OF BIRTH: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE: (____) _____ E-MAIL: _____

CURRENTLY EMPLOYED? ___ OJT ___ PART-TIME ___ FULL-TIME; HOURS PER WEEK: _____

EMPLOYER: _____

FAMILY INFORMATION

FATHER'S NAME: _____ OCCUPATION: _____

ADDRESS: _____

MOTHER'S NAME: _____ OCCUPATION: _____

ADDRESS: _____

EDUCATION INFORMATION

HIGH SCHOOL: _____ SCHOOL COUNTY: _____ GRAD YEAR: _____

FUTURE EDUCATION PLANS: _____

PERSONAL STATEMENT

ATTACH A TYPED OR PRINTED IN INK ESSAY (LIMITED TO ONE PAGE AND NO MORE THAN 350 WORDS; EXCEEDING EITHER OF THESE WILL RESULT IN DISQUALIFICATION) THAT ADDRESSES EACH OF THE FOLLOWING:

- FINANCIAL NEED
- PERSONAL OR FAMILY ADVERSITY THAT HAS BEEN OVERCOME
- EXTRACURRICULAR INVOLVEMENT, LEADERSHIP AND AWARDS
- VOLUNTEER SERVICES AND/OR EMPLOYMENT
- FUTURE CAREER OBJECTIVES AND GOALS

SIGNATURE: _____ DATE: _____

THE FOLLOWING TO BE COMPLETED BY THE SCHOOL GUIDANCE DEPARTMENT

STUDENT'S NAME: _____

RANK IN CLASS: _____ **OF** _____ **UNWEIGHTED GPA:** _____

NAME (PRINT): _____ **TITLE:** _____

PHONE: _____

SIGNATURE: _____ **DATE:** _____

.....

THE *DEADLINE* FOR SUBMITTING THIS APPLICATION IS FRIDAY, FEBRUARY 14, 2020.

SEND TO: YOUTH EXCHANGE SCHOLARSHIP TRUST FUND
C/O DENNIS DULNIAK
1772 CARILLON PARK DRIVE
OVIEDO, FL 32765

TELEPHONE: 407-971-9966

EMAIL: DDULNIAK@GMAIL.COM

