## LaPorte County Agricultural Association

## Vocational Scholarship Award \$1,250

# Limited to High School Seniors & Current LaPorte County 4-H Member

Scholarship Year: 2022-2023		Application Deadline: May 1, 2023	
APPLICANT DATA			
Last Name	First	Middle Initial	
Home Address		<del>-</del>	
City	Township	Zip Code	
Phone	Date of Birth (MM/DD/YYYY)		
Email Address			
PARENT OR GUARDIAN DATA			
#1:			
Last Name	First	Middle Initial	
Address			
Relationship to Applicant	Day Telephone ()		
Employer	Position		
#2:			
Last Name	First	Middle Initial	
Address			
Relationship to Applicant	Day Telephone ()		
Employer	Position		
VOCATIONAL SCHOOL/TRADE S	CHOOL DATA		
Name of Vocational, Trade, Etc.	School. Use official school names. Do NC	OT use abbreviations. (Some lines may not apply)	
School Name		State	
Area of Focus		Approx. Cost Per Year \$	
Apprenticeship Description (if a	pplicable)		
OTHER SCHOLARSHIPS APPLIED	FOR AND/OR RECEIVED		

## LPCAA – VOCATIONAL SCHOLARSHIP WORK EXPERIENCE – LAST TWO YEARS

Employer/Position	Dates of Employment	Hours Per Week
		l
SCHOOL ACTIVITIES – List all school acti more space is needed.	ivities in which you have participated during t	he past four years. Attach page if
Activity	No. of Yrs. Offi	ices Held
4-H ACTIVITIES – List all 4-H projects in space is needed. Activity/Project/Club	which you have participated while you have be No. of Yrs. Off	oeen in 4-H. Attach page if more
ADDITIONAL ACTIVITIES, AWARDS & HO	ONORS:	

### LPCAA - VOCATIONAL SCHOLARSHIP

### **ESSAY**

- How will your future be impacted by receiving this award?
- Describe your interest in being in a trade and how it will influence your future.
- How has working in this trade benefitted you and what life lessons have you learned?
- What are your long-term goals as they relate to your educational objectives and career?

Your typed response should be on a separate 8.5x11 sheet of paper and limited to 500 words or less. Include your name and the name of the scholarship program at the top of the page.

TRANSCRIPT INFORMATION		
Please include a high school transcrip	t of grades.	
High School Name:		
GPA:	No. in Class, if known:	
correct. If requested, I will provide pr	ertify to the best of my knowledge and belie oof of information. I understand that failure ualification for consideration. Falsification o	e to report all information accuretley
Signature of Applican	nt	Date
Signature of Parent/G	Guardian	Date

### APPLICATION CHECKLIST

- Student Application
- Student Essay
- Transcript of Grades

APPLICATION MUST BE RECEIVED BY MAY 1, 2023 TO THE EXTENTION OFFICE OR FAIR OFFICE OR EMAIL TO: laportefair@gmail.com