

LaPorte Community Federal Credit Union
Wayne Lottes Memorial Scholarship Check List

Before Submitting The Application, Please Be Sure To Include:

1. Proof of graduation or intent of graduation from High School
2. Written proof of enrollment in an accredited College or University.
3. Written proof of a “B” or above grade point average (Ex: Academic Transcript).
4. A letter of recommendation from a teacher, counselor, advisor or employer.
5. Make sure all areas of requested information are filled in.
6. Make sure application is signed and dated.

**Applications that do not include ALL INFORMATION REQUESTED
ON THE SCHOLARSHIP APPLICATION will NOT be considered.**

**LAPORTE COMMUNITY FEDERAL CREDIT UNION
WAYNE LOTTES MEMORIAL SCHOLARSHIP APPLICATION**

General Information

Name: _____

LaPorte Community Federal Credit Union Account Number: _____

Address: _____

Phone Number: _____ High School: _____

Father's Name: _____

Occupation: _____ Where Employed: _____

Mother's Name: _____

Occupation: _____ Where Employed: _____

Number Of Brothers And Sisters: _____

Number Of Family Members Enrolled, And Attending
College During The Next School Year Including Yourself: _____

College Or University You Will Be Attending: _____

Intended Course Of Study: _____

Scholastics

Current School GPA:_____ Class Rank (If Known):_____

Scholastic Awards Or Honors Earned:_____

Honors Or Advanced Placement Programs Completed:_____

Academic Competition Participation:_____

School Activities

Indicate Membership, Participation And Function
In Any School Organizations, Clubs Or Activities:_____

Explain Any Leadership Positions, Or
Responsibilities Which You Have Held:_____

Non-School Related Service Activities

Describe Any Non-School, Or Community Related Service Activities You Have Been, Or Are Currently Involved In: _____

Indicate Any Community Leadership Positions, Or Responsibilities Held: _____

Explain Any Further Non-School Experiences That Have Had A Great Impact On, Or Influenced Your Life: _____

Please attach a letter of recommendation from a teacher or employer, who can best attest to your character and abilities. This letter may help the scholarship committee distinguish you from other applicants.

Applicants Name: _____

Applicants Signature: _____

Date: _____

This application must be received by March 31, 2011.

Mail Or Deliver This Application To:

**LaPorte Community Federal Credit Union
Attention: Scholarship Committee
1304 Jefferson Ave.
LaPorte, IN 46350**
