**2022-2023 LIASCD Scholarship Application**

**IMPORTANT: Your application must include either a school counselor’s or building administrator’s signature below**

**Student Name:**

**Street Address:**

**City, State, ZIP:**

**Date of Birth:**

**Student Email:**

**Student Phone:**

**Expected Date of Graduation:**

**Extra-Curricular activities:** *(Please include any leadership positions held. Also include your history of community service.)*

*Student Signature:*

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Print: School Counselor Name Signature of School Counselor

Or Building Administrator or Building Administrator

This application must be saved as a .pdf file and emailed by the counselor or building administrator to [scholarship@liascd.com](mailto:scholarship@liascd.com) You must include this application along with the following: Personal narrative, one letter of recommendation, and student transcript.