

# 2021 Scholarship Application

► Only **ONE** application per recipient will be accepted. ◀

## APPLICATION / TRANSCRIPT\* DEADLINE IS MAY 1<sup>st</sup>

All entries must be postmarked by **May 1<sup>st</sup>** and received by **May 8<sup>th</sup>**. **ALLOW ENOUGH TIME FOR MAILING!**



### SCHOLARSHIP RECIPIENT

**!** Please include an email address for confirmation that we have received your application.

Name	FIRST	LAST			Sex	<input type="checkbox"/> M	<input type="checkbox"/> F
Phone	Email		DOB				
Address	City		State	Zip			
Is the recipient an insured on an LCBA certificate?				<input type="checkbox"/> NO	<input type="checkbox"/> YES	If yes, certificate #:	

### ENTRIES FOR LCBA BENEFIT MEMBERS - List certificate numbers for parents/guardians, grandparents, and great-grandparents

Certificate #	Name	Relation to Recipient

### PARENT / GUARDIAN (If scholarship recipient is under 18)

Name	FIRST	LAST		
Phone	Email			
Address	City		State	Zip

### SCHOOL / CAMP INFORMATION - Select scholarship(s) applying for. (You may apply for more than one on this application)

<input type="checkbox"/> ELEMENTARY / SECONDARY	<input type="checkbox"/> POST-SECONDARY	<b>!</b> TRANSCRIPTS FOR POST-SECONDARY SCHOLARSHIPS ARE DUE BY MAY 1 <sup>ST</sup> !
Name of Institution		Enrollment Date
Address	City	State Zip
Contact Name	Phone	Tuition
<input type="checkbox"/> CAMPING		
Name of Camp		Date Attending
Address	City	State Zip
Contact Name	Phone	Cost

Send completed application and/or transcripts to:

Email: [scholarships@lcbalife.org](mailto:scholarships@lcbalife.org)  
Subject: Scholarships

Mail: ATTN: Scholarships  
LCBA  
PO Box 13005  
Erie, PA 16514-1305

**\* For POST-SECONDARY SCHOLARSHIPS ONLY, you must send your official transcripts in a sealed envelope from your school to LCBA (address at left). If your school uses an online system please have the link emailed directly to [scholarships@lcbalife.org](mailto:scholarships@lcbalife.org). Applications without qualifying transcripts will not be considered.**

**!** DON'T FORGET TO INCLUDE YOUR PHOTO! **!**

I give permission to LCBA to use recipient's name and/or images to promote LCBA and its scholarship programs. If recipient is under 18, a parent/guardian signature is required. (See LCBA's privacy policy online for complete details.)