LMC Scholarship Application

**Applicant Information:**

Name

# Permanent Address

# City, State & Zip Code

Phone

# Date of Birth

**Parent or Guardian:**

Name

Address

# City, State & Zip

Phone **Acedemic Information:**

# High School Attending

GPA

Please attach your transcripts

List any academic honors, awards & membership activities while in High School.

List your hobbies, outside interests, school related volunteer activities.

College/Technical School Planning to OR Attending

**Financial Services Contact Information:**

Name

Address

City, State & Zip

Phone

Are you currently a member of LMC?

List any ministries or LMC programs you have participated in the last 2 years?