

CLEVELAND LIVESTOCK SHOW

VOCATIONAL SCHOLARSHIP APPLICATION

The Cleveland Livestock Show Scholarship is open to a high school senior or graduate eligible to participate in the Cleveland Livestock Show. The candidate must enroll in an approved vocational program at an accredited college or technical school. The candidate must enroll as a full time student.

The Cleveland Livestock Show will provide a minimum of one scholarship in the amount of \$1,000.00 to an outstanding student who has participated in the Cleveland Livestock Show.

The candidate **MUST** submit:

1. A copy of his/her SAT or ACT score
2. A high school transcript with his/her present rank in class
3. A completed typewritten application for scholarship. No handwritten application will be judged.
4. **The above items must be scanned and emailed to clsddscholarships@gmail.com by March 1st.**

Any candidate who does not submit all of these requirements will be disqualified.

Selection will be based on participation in the Cleveland Livestock Show, scholarship, leadership, citizenship, need and a personal interview. The winner will be announced at the Buyers Dinner of the Cleveland Livestock Show.

The scholarship funds will be sent to the college or university that the student will attend after proof of registration and the ADDRESS of the Financial Aid Office has been submitted to the Scholarship Committee. Funds will be sent to the college or technical school where the recipient is enrolled as a full time student and is in good standing academically at a rate of one-half of the full scholarship per semester.

In order for the scholarship check to be released, the following steps must be followed:

1. Send a letter from the Registrar (with a raised seal) stating that you are enrolled for 12 or more hours to the Scholarship Committee.
2. Send a copy of the past semester's transcript to the Scholarship Committee. (For first time applicants, this is not necessary for the first payment.)
3. **Make sure the committee has the ADDRESS for the school's Financial Aid Office.**

Applicants must apply for payment within two years from the date of graduation or forfeit the scholarship.

The completed application, SAT/ACT scores and transcript must be scanned and emailed to clsddscholarships@gmail.com by March 1st.

Applicant Information:

Name: _____ Social Security Number: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone _____ Email Address: _____

Expected Date of Graduation: _____ Current GPA: _____

Parent's Information:

Mother's Name: _____ Phone #: _____

Father's Name: _____ Phone #: _____

Scholastic Information: Please remember to submit proof of information provided below.

Number in Graduating Class: _____ Rank in Class: _____

Scholastic Average: _____ Are you in advanced honors? _____

If "yes" please list the honor or advanced course(s) below:

SAT and/or ACT score(s): _____ Date of Test(s): _____

College Plans:

Have you been admitted to a college or technical school? _____ If yes, please name the college(s) below:

Write a short essay (100 words or less) telling where you have been and where you are going:

Signature of Applicant

Date