

THE LIONS CLUB OF DAMASCUS

P. O. Box 267

Damascus, Maryland 20872



DAMASCUS LIONS FOUNDATION

APPLICATION FOR SCHOLARSHIP GRANT

STUDENT INFORMATION

Name _____

Date and Place of Birth _____

Home Address _____

Home Telephone No. _____

Name of Parent/Guardian _____

Home Address _____

Home Telephone No. _____ Work _____

SCHOOL INFORMATION

Name of High School _____ Telephone No. _____

Address _____

College or Trade School preferences (please list in order) Please indicate those where you have been accepted with an (*).

Career objective/proposed course of study _____

SCHOOL ACTIVITIES

<u>Year</u>	<u>Activity</u>	<u>Position/Committee Served</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

WORK EXPERIENCE

<u>From</u>	<u>To</u>	<u>Employer</u>	<u>Position</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

COMMUNITY ACTIVITIES

<u>Year</u>	<u>Activity</u>	<u>Position</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

REFERENCES (not relatives)

Name

Address

Telephone Number

COMMENTS

Please write here any addition information or special facts that you would like the Scholarship Committee to consider with your application.

Applicant's Signature

