## **SLEMCO 2020 SCHOLARSHIP APPLICATION**

## Please read all requirements on the back of this application to make sure you are eligible before submitting your form

## **Student** Please print or type. All fields must be completed.

MR. MRS.	MOST RECENT GRADE POINT AVERAGE (GPA)
Image:	
	NAME OF SCHOOL (FOR THIS GPA)
ADDRESS	THIS GPA IS FROM ( <i>Check one</i> )      HIGH SCHOOL      COLLEGE      TRADE SCHOOL
CITY, STATE, ZIP	
PARISH	LOUISIANA UNIVERSITY OR TRADE SCHOOL YOU ARE PLANNING TO ATTEND
TELEPHONE NUMBER (Day)	ARE YOU PLANNING TO BE A FULL-TIME STUDENT (12+ HOURS)?
TELEPHONE NUMBER (Night)	SPONSORING SLEMCO MEMBER
STUDENT'S DATE OF BIRTH	SLEMCO ACCOUNT NUMBER
LAST 4 DIGITS OF STUDENT'S SOCIAL SECURITY NUMBER	YOUR SLEMCO ACCOUNT IS FOR YOUR:  HOME CAMP HOME OTHER (Please explain)
(Winners will need to provide complete social security number at annual meeting)	RELATIONSHIP TO STUDENT:
STUDENT'S OR PARENT'S E-MAIL (Needed for confirmation receipt)	SELF PARENT SPOUSE GUARDIAN (If last name is different, please indicate reason below) STEPPARENT REMARRIED MAIDEN NAME
	□ STEPPARENT □ REMARRIED □ MAIDEN NAME □ OTHER (Please explain)

In some instances, recipients of the SLEMCO scholarship have been denied other forms of financial aid because of receiving the SLEMCO scholarship. It is your responsibility to check with the financial aid office at the university or tade school you are attending to see how winning the SLEMCO scholarship will affect you.

In signing this form I confirm that I have read and understand all the eligibility requirements for the SLEMCO scholarship program (which are listed on the back of this form) and agree to meet all of them. Compliance with all terms and conditions of this scholarship program is subject to verification by SLEMCO prior to any awarding of funds. If selected as a recipient of a SLEMCO scholarship, I agree to allow SLEMCO to use my name and/or photograph to promote this scholarship program in the future.

## SIGNATURE OF STUDENT AND SLEMCO MEMBER ARE REQUIRED

SCHOLARSHIP ST	TUDENT'S SIGNATURE	DATE
SLEMCO MEMBE	R'S SIGNATURE	DATE
<b>Submission</b> <b>INFO</b> Questions can be d	Mail applications to SLEMCO Scholarship Program, P.O. Box 90866, Lafayette, LA 70509. Downloaded electronic applications can be e-mailed to <i>scholarship@slemco.com</i> . Deadline is 4:30 p.m., May 7, 2020. lirected to Lita Mills at (337) 896-5384. <i>If you do not receive an e-mail</i>	APPLICATION DEADLINE May 7, 2020 All mailed submissions must be postmarked by May 7
confirming receipt c	of your application within 10 working days, contact SI EMCO	