



**Oregon Trail Community Foundation**  
**P.O. Box 1344, 115 Railway Street, Scottsbluff, NE 69361**

## **LAWRENCE LEMONS MEMORIAL SCHOLARSHIP CRITERIA**

### ***For Scottsbluff High School Graduating Seniors***

One \$500 scholarship will be given annually to a Scottsbluff High School graduating senior with a grade point average of 2.5 or higher. Applicants may pursue an associate's or bachelor's degree and attend a two- or four-year college or university. Preference will be given, but is not limited to, an applicant who has an interest in pursuing a teaching career. An alternate will also be selected.

Application forms are available from the Scottsbluff High School guidance counseling office. For more information call (308) 635-6243.

The scholarship will be paid directly to the school. **Deadline for application and supporting documents is February 15th.** Recipients will be announced in May.

The scholarship will be rescinded and awarded to the alternate if the recipient does not enroll as a fulltime student for the first semester for which the scholarship is awarded.

To qualify for the Lawrence Lemons Memorial Scholarship, students must:

- Complete the application form
- Attach a formal letter stating:
  - The student's educational and career goals
  - Financial need for college expenses
  - Why student believes they are deserving of the scholarship



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## **LAWRENCE LEMONS MEMORIAL SCHOLARSHIP APPLICATION**

Applicants must submit application and all supporting information to the Scottsbluff High School Counseling Office in an organized, readable form. ***If it is not received by the February 15th deadline, the application will not be reviewed.*** Attach copy of official ACT/SAT and high school transcript. Final grades for senior year are not required to apply. Please attach separate sheet if space is not adequate to list all information.

**Applicant's Full Name** \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone # \_\_\_\_\_ E-mail Address \_\_\_\_\_

Last 4 digits of Social Security #: \_\_\_\_\_ Date of Birth \_\_\_\_\_

**Mother's Name** \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone # \_\_\_\_\_ E-mail Address \_\_\_\_\_

**Father's Name** \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone # \_\_\_\_\_ E-mail Address \_\_\_\_\_

GPA \_\_\_\_\_ Class Rank \_\_\_\_\_ # of Students in Class \_\_\_\_\_ ACT Score \_\_\_\_\_ SAT Score \_\_\_\_\_

College, university or technical school you plan to attend.

\_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

In what subject do you plan to major? \_\_\_\_\_

Year of High School Graduation \_\_\_\_\_ Anticipated Year of College Graduation \_\_\_\_\_

School-related activities including athletics, music, student government, etc. in Grades 9, 10, 11 and 12:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Community-related activities including clubs, church groups, volunteer work, etc.:

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Work experience:	<i>Employer</i>	<i>Phone #</i>	<i>Length of Time Worked</i>
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Academic honors:

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Please check if you have been awarded the following: ☐ Regent's Scholarship ☐ Other Full-Tuition Scholarship

Please list scholarships for which you have applied and indicate with an asterisk any you have been awarded and the amount of the award.

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Attach a formal letter stating:

- Your educational and career goals
- Your financial need for college expenses
- Why you believe you are deserving of the scholarship

Signature: \_\_\_\_\_ Date \_\_\_\_\_