



Pottsville Lions Charities, Inc. Scholarship Application

Established 2009

The Pottsville Lions Club's motto, as all Lions Club's, is "We Serve," and that is the direction the club is taking by establishing a scholarship fund with the Community Foundation. The club members and Charities Committee are excited that now, as a result of their efforts in organizing the annual Great Pottsville Cruise, the Battle of the Hills and other fundraisers, they are able to invest in the future of our youth. The scholarship fund will provide opportunity to local youth, recognize the efforts of club members and volunteers, and leave a legacy of service to others in our community. This is a new chapter in the Pottsville Lions Club's history, but consistent with the community spirit that led to the founding of the Lions Ambulance Service over fifty years ago.

Students will be notified if they are awarded the scholarship. A check will be mailed directly to the college for undergraduate and graduate students. For 1st year college students payment shall not be made until the recipient has completed his/her first semester of schooling and completed and returned a Student Release Form. After Student Release Form is returned a check will be mailed directly to the college.

Criteria:

- Graduating high school senior, or graduate, who resides in the Pottsville Area School District
- Plans to attend, or is attending, an accredited college, university, technical or vocational school to study in either the field of health care or in the field of automotive industry

All applications and required attachments must be mailed to the address listed below by April 1st.

Please be aware that there cannot be any exceptions to established deadlines.

**Pottsville Lions Charities, Inc. Scholarship Committee
322 North Ninth Street
Pottsville, PA 17901**

Pottsville Lions Charities, Inc. Scholarship Application

Applicant Data

Name: Last: _____ First: _____ Middle Initial: _____

Maiden Name (if applicable): _____

Address: Street: _____ Apartment: _____

City: _____ State: _____ Zip: _____

Phone: (_____) _____ E-mail: _____

Social Security Number: _____

High School Data

Name of high school from which you will, or have, graduated: _____

Year of high school graduation: _____

School Activities/Clubs and Community Involvement

List all school activities in which you have participated during the past four years (e.g., student government, music, sports, etc.). Indicate all special awards, honors and offices held. Use an additional sheet, if necessary.

Activity	No. of Years Participated	Offices Held	Special Awards, Honors

Post-Secondary School Data

Please list the name of the post-secondary school that you will be attending. **Attach a copy of the acceptance letter or letter of current enrollment/attendance.**

School: _____

Address: _____ City: _____ State: _____

Major or course of study: _____ Acceptance Date: _____

Employment History:

Please provide your employment history. Please include dates, positions held and a brief description of responsibilities:

Employer	Address	Dates	Position	Description

Please list your three (3) strongest personal traits:

Please attach a copy of the following to this application:

- **Letter of recommendation from a physician/allied health professional or automotive industry professional**
- **Letter of character reference**
- **Statement of why you wish to pursue a career in the field of healthcare or automotive industry**

Certification

The above application has been read and the statements are true and correct to the best of my knowledge and ability. I understand that any misrepresentation or false statements or omissions of facts may be cause for rejection of my application or require me to repay the entire amount of the scholarship.

Applicant's Signature:

Date:

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