



LEHIGHTON EDUCATION & ATHLETIC  
FOUNDATION

Lehigh Area High School, 1 Indian Lane, Lehigh, PA 18235

**PLEASE NOTE:** Failure to complete application IN FULL will disqualify the applicant from consideration. Please answer all questions, leaving no blanks.

# LEAF STUDENT SCHOLARSHIP APPLICATION

1. Name \_\_\_\_\_ Student ID # \_\_\_\_\_  
LAST FIRST MIDDLE

2. Address \_\_\_\_\_

3. Please check the township in which the student resides:

Lehigh Borough  Franklin  Mahoning  East Penn  Weissport

4. Class Ranking \_\_\_\_\_

5. Place of Employment \_\_\_\_\_ Present Year in School/College \_\_\_\_\_

6. Lehigh Elementary School(s) attended: \_\_\_\_\_

Number of years attended: \_\_\_\_\_

7. Student's Income from Last Tax Year: \$ \_\_\_\_\_

8. Have you saved any money toward your education?  Yes  No

9. Current total cash balance of student's checking and/or savings accounts: \$ \_\_\_\_\_

10. How was this money obtained? \_\_\_\_\_

11. College/trade schools where you are accepted: \_\_\_\_\_

12. College/trade school where you plan on attending: \_\_\_\_\_

Your major or intended field of study there: \_\_\_\_\_

13. Campus status:  Off-campus housing  With Parents  With Relatives  Commuter

14. Total expenses for student for academic year: Tuition and fees \$ \_\_\_\_\_

Room and board: \$ \_\_\_\_\_

15. How much annual financial help can your parents provide? \$ \_\_\_\_\_

16. Would you accept work study and/or loans as part of your financial aid package?  Yes  No

17. Have you applied for: A. Other local scholarships  Yes  No

B. Federal and State Aid  Yes  No

18. List the total amount of scholarship money awarded to date: \$ \_\_\_\_\_

19. Name of person(s) you live with: \_\_\_\_\_

20. Father or guardian's employer: \_\_\_\_\_ Job title: \_\_\_\_\_

21. Mother or guardian's employer: \_\_\_\_\_ Job title: \_\_\_\_\_

22. Please check the range for total gross family income for the household which you live:

less than \$10,000       \$10,000-\$19,999       \$20,000-\$29,999       \$30,000-\$39,999

\$40,000-\$49,999       \$50,000-\$74,999       \$75,000-\$100,999       \$101,000+

23. The number of applicant's brothers and sisters who will be dependent on applicant's parents for college next year: \_\_\_\_\_

24. Number of tax dependent children (including applicant): \_\_\_\_\_

25. Did you or your parent/guardian(s) attend any of the financial aid sessions held here at the high school?

Yes       No . . . . . If yes, did you find it helpful?  Yes       No

Did you or your parent(s) attend any of the financial aid sessions held in any of the local colleges?

Yes       No . . . . . If yes, did you find it helpful?  Yes       No

26. Please explain any unusual circumstances concerning your family's financial situation: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

27. Please list school-based extracurricular activities, including any leadership positions, awards and years of involvement: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

28. Please list community-based activities and volunteer services, including any booster clubs. Also, list any leadership positions and employment: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**I HAVE CHECKED THIS APPLICATION AND APPROVE ALL THE STATEMENTS MADE:**

\_\_\_\_\_  
**Parent/Guardian's Signature**

\_\_\_\_\_  
**Applicant's Signature**

\_\_\_\_\_  
**Applicant's Social Security Number**

**Note: Failure to complete the application IN FULL OR MISREPRESENTING PERSONAL INFORMATION WILL DISQUALIFY THE APPLICANT FROM CONSIDERATION.**

**All applications must be returned to the high school guidance office by Friday, February 25, 2023 at 3 p.m.**