

# Lions Club Allied Health Programs Scholarship

Sponsored by the Lampasas Lions Club

## Student Application

**Completed applications are due to LCHEC: TWO WEEKS prior to class start**

This scholarship is for \$500 toward the course cost of an allied health program taken at LCHEC. The student will be responsible for the balance of the course cost. Scholarship criteria: need, citizenship, and character.

Name: \_\_\_\_\_ Telephone: (\_\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_

Annual family income: \$ \_\_\_\_\_ Total number in family living at home: \_\_\_\_\_

Number of family members including yourself who are unemployed: \_\_\_\_\_

Number of family members including yourself who are in school: \_\_\_\_\_

Highest level of education (please circle one):

8<sup>th</sup> Grade    9<sup>th</sup> Grade    10<sup>th</sup> grade    11<sup>th</sup> grade    High School Diploma    GED  
Some College    Associate's degree    Bachelor's degree    Graduate degree

Allied Health Program for which you are applying: \_\_\_\_\_

Sources and amounts of financial aid previously received for this program:

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Please explain how you plan to finance your courses if you do not receive a scholarship.

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On a separate sheet of paper, please write an essay (minimum 250 words) or record a 2 minute long video about yourself, including your education/career goals and why you need this scholarship. Please include an example of how you practice good citizenship and exhibit good character in your school and community. Attach high school transcript, college transcripts (if applicable), and two letters of recommendation (including one from an educator).

**Return completed applications to LCHEC.**

Mailing Address  
LCHEC  
PO Box 184  
Lampasas, TX 76574

Drop off location  
LCHEC  
208 East Avenue B  
Lampasas, TX 76550

Questions?  
512-556-8226  
info@LCHEC.net