

Las Vegas City Employees' Association 2021 Scholarship Application – Dependent

Student Information:

Last Name: _____ First Name: _____

Contact Phone Number: _____ E-mail Address: _____

Mailing Address: _____

Freshman

Returning

LVCEA Parent/Guardian Information:

Last Name: _____ First Name: _____

Contact Phone Number: _____ E-mail Address: _____

Educational Information:

Current High School/College Name: _____ GPA (unweighted): _____

Future College or University to Attend: _____

Degree Program/Major: _____

Mailing Address: _____

Please share your academic honors/awards, extracurricular and volunteer activities (attach additional sheets as necessary):

OFFICE USE ONLY

DATE APPLICATION PACKET RECEIVED: _____

RECEIVED BY: _____

VERIFICATION PROCESS CHECKLIST – ALL ITEMS CHECKED OFF AS INCLUDED IN THE PACKET: **YES OR NO**

VERIFICATION PROCESS CHECKLIST	
<input type="checkbox"/>	COMPLETED APPLICATION
<input type="checkbox"/>	BIRTH CERTIFICATE/LEGAL GUARDIANSHIP PAPERS
<input type="checkbox"/>	PARENT/LEGAL GUARDIAN A MEMBER IN GOOD STANDING FOR AT LEAST TWO (2) YEARS
<input type="checkbox"/>	HIGH SCHOOL/COLLEGE TRANSCRIPT – CUMULATIVE GPA OF 3.0
<input type="checkbox"/>	750 WORD ESSAY
<input type="checkbox"/>	THREE (3) LETTERS OF RECOMMENDATION
<input type="checkbox"/>	VERIFIED AND APPROVED AS CANDIDATE

SELECTED AS RECIPIENT FOR 2021: **YES OR NO**

ADDITIONAL COMMENTS: _____

