# Requirements

This application is for a scholarship awarded by the Southern Loss Association. To be eligible for this Scholarship, the applicant must:

A) Produce evidence of enrollment as a full-time student at a post-secondary institution accredited by accrediting agencies or state approval agencies recognized by the U.S. Secretary of Education for the school semesters of Spring 2024, Fall 2024, and/or Spring 2025. Include evidence of current GPA and Classification (i.e. Freshman, Sophomore…) AND either “B” or “C”

B) Be the child, grandchild, great-grandchild or a legally adopted child of a current dues paid full or associate member of the Southern Loss Association

OR

C) Include a written letter of recommendation from a current dues paid full or associate member of the Southern Loss Association.

# Instructions

Please provide the requested information in the spaces provided, attach evidence of enrollment as a full-time student and your GPA, along with your two written essays, and email your application to the following email address.

We no longer accept applications by regular mail.

Please send the completed application to [southernloss@gmail.com](mailto:southernloss@gmail.com).

We begin accepting applications on August 15, 2024.

All scholarship applications must be submitted by email no later than midnight, October 16, 2024.

Scholarships will be awarded at the December 2024 SLA luncheon.

## Personal Information

|  |  |
| --- | --- |
| First Name |  |

|  |  |
| --- | --- |
| Last Name |  |

|  |  |
| --- | --- |
| Address |  |

|  |  |
| --- | --- |
| Primary Phone |  |

|  |  |
| --- | --- |
| Alternate Phone |  |

|  |  |
| --- | --- |
| Primary Email |  |

## Southern Loss Association Member Sponsor

|  |  |
| --- | --- |
| First Name |  |

|  |  |
| --- | --- |
| Last Name |  |

|  |  |
| --- | --- |
| Address |  |

|  |  |
| --- | --- |
| Phone |  |

|  |  |
| --- | --- |
| Email |  |

## Education

Please note that we will request evidence of full-time enrollment and GPA once your application has been reviewed.

|  |  |
| --- | --- |
| High School |  |

|  |  |
| --- | --- |
| High School GPA |  |

|  |  |
| --- | --- |
| Postsecondary Institution |  |

|  |  |
| --- | --- |
| Postsecondary Institution GPA |  |

## Extracurricular Activities

Please include your role and responsibilities.

1)

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| --- |
|  |

2)

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| --- |
|  |

3)

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|  |

## Essay Questions

Your answers should be no more than 250-300 words in length each.

What are your plans and dreams for the future?

|  |
| --- |
|  |

What person or persons in your life have made a difference in your character development and why?

|  |
| --- |
|  |

## Signature

By signing (typing your legal name) in the space below, you are certifying that all information is correct and that you are the person completing this application.

Applicant Signature

|  |  |  |
| --- | --- | --- |
|  | Date: |  |