



### Scholarship Application for College Application Fee

#### Applicant Information

Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
*First Last*

Mailing Address: \_\_\_\_\_  
*Street Address/PO Box Apartment/Unit #*

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_  
Cell Phone (for texts): \_\_\_\_\_ Email (not .ltsd.org) \_\_\_\_\_

Current High School You Attend: \_\_\_\_\_

12<sup>th</sup> Grade Language Arts Teacher/Email: \_\_\_\_\_

Name of College/University (City, State) this Application is For: \_\_\_\_\_

Date Application Due: \_\_\_\_\_ Application Fee:\$ \_\_\_\_\_

Does Reimbursement for Application Fee work for you (a receipt will be required)? YES  NO   
If no (and you receive this scholarship), we will pay upfront for you...we will just need to sit down with you when you actually apply.

#### Disclaimer and Signature

*I certify that my answers are true and complete to the best of my knowledge. If this application leads to a scholarship, I understand that false or misleading information in my application will void my scholarship.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please email your completed application to [cappfund20@gmail.com](mailto:cappfund20@gmail.com)