

Laurel Arts League

SCHOLARSHIP APPLICATION

NAME: _____
HOME ADDRESS: _____
SCHOOL: _____
SCHOOL ADDRESS: _____
TELEPHONE: (Home) _____ (School) _____
SOCIAL SECURITY NUMBER: _____
PRESENT COLLEGE YEAR: _____ CUMULATIVE G.P.A. _____
MAJOR: _____ G.P.A IN MAJOR _____
CAREER GOAL: _____

ART TRAINING AND EXPERIENCE: _____

DESCRIPTIVE OF PRIMARY ART WORK (Please include a CD Rom (jpeg format) of your work.): _____

WORK EXPERIENCE: _____

FINANCIAL POSITION (Include all sources of income and your expenses.): _____

*Two (2) letters of recommendation should be included with this application and mailed to:

Laurel Arts League
c/o Maranda McLaughlin
1037 North 6th Avenue
Laurel, Mississippi 39440

APPLICATIONS ARE DUE APRIL 1, 2010

Maximum Scholarship available is \$2,000 with one half of amount paid each semester. Within the scholarship year, scholarship recipient will be expected to donate a work of his/her choice to the Laurel Art League.

PLEASE ENCLOSE A STAMPED, SELF-ADDRESSED ENVELOPE IF CD ROM IS TO BE RETURNED.