

Bernard B. and Anna Lehman Scholarship Application Form

Name of student _____ Phone # _____

Address _____

CHS Grade Point Average _____ ACT composite score _____

Extra-curricular activities & leadership participated in at CHS

Honors received _____

College/University you plan to attend _____

Have you been accepted? _____ Major area of study _____

Community involvement activities and leadership

Father's name _____ Mother's name _____

Address(es) _____

What do you plan to do after completing the program of study you are embarking upon? Why have you chosen this intended area of work?

What additional activities are you involved in?

Please add any other personal information, which may help the selection committee. Example: special circumstances with family such as number of family members in college, work transitions of family members or medical issues causing additional financial burden.

Signature of Applicant

Printed Name of Applicant

Date signed

*Please attach a copy of high school transcript.