

Airport Golf Club

SCHOLARSHIP APPLICATION

Name		Date
Address Street City, State, ZIP		
Parents Name		
Club Membership Number		
High School		
Graduation Year		GPA (Please Submit Official Transcript)
Name of College or University		
Address Street City, State, ZIP		
Years Completed		GPA (Please Submit Official Transcript)
If you would like to list any past scholastic information or personal goals that you might have, please do so.		

If you are successful in receiving a scholarship from the club, the monies awarded will be sent to the college or university you are attending. When you are registering for school the monies will be applied to your costs.

Please submit an official high school or current college transcripts as applicable. While grade point average (GPA) represents only a portion of the total evaluation, the transcript serves as an official record of your GPA and failure to submit a current transcript may jeopardize this portion of your application.

Board of Directors
Airport Golf Club Inc.

Applications must be received by **June 15** to be eligible for that year.

☐ By checking this box, I hereby certify the provided information is accurate to the best of my knowledge. I also certify that I will allow the Financial Aid Office at LCCC to release any information that is applicable to this application.

Date

Please email completed application to: Financialaid@lccc.wy.edu